

# North Clackamas Masters Swimming Membership Application

*North Clackamas Masters Swimming (NCMS) is a non-profit organization, organized and run by volunteers, whose goal is to provide opportunities for members to develop their full swimming potential within a supportive team environment that promotes fitness, fellowship, and fun.*

## **Workouts:**

Workouts are held at the North Clackamas Aquatic Park and require payment of the Aquatic Park's general admission fee. An annual pass (recommended) or discounted "punch cards" are available to purchase at the admissions area.

## **Schedule:**

M/W/F from 5-6am; Sat from 6-7am

## **Fee Structure:**

- Annual Fee: \$20
- Monthly dues: \$30 for all workouts or \$15 for one day a week.
  - For the one day per week option, you can select the day, but are restricted to one time per week only.
  - The dues cover monthly coaching costs and must be paid by the 10th of each month.
- Drop in fee: \$5 per session.
- Make checks payable to: North Clackamas Masters Swimming (NCMS)

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**OMS/USMS Membership #** \_\_\_\_\_

*Enrollment in state and US organization is mandatory*

*Register online at [swimoregon.org](http://swimoregon.org)*

I, the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and not been otherwise informed by a physician. I acknowledge that I am aware of the risks inherent in masters swimming (training, competition, and other activities) include possible and permanent disability or death, and agree to assume all those risks. As condition of my participation in the masters swimming program and North Clackamas Masters Swimming team, or any activities incident thereto, I hereby waive any and all rights to claims for those losses or damages, including all claims for loss or damage by the negligence, active or passive, of the following: United States Masters Swimming, Inc.; Oregon Masters Swimming, Inc.; North Clackamas Masters Swimming; host facilities; or board members past or present and the supervision coach.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Applications can be dropped off at practice or emailed to the NCMS coach at [swimmerjlk@gmail.com](mailto:swimmerjlk@gmail.com)*

# North Clackamas Masters Swimming

*This form will be used by the NCMS coach to help address your individual goals and needs.*

**Date:** \_\_\_\_\_ **Member Name:** \_\_\_\_\_

**Swimming Goals:**

**Comments:**