



U.S. MASTERS SWIMMING

GROWING STRONGER THROUGH SWIMMING

Monday, Wednesday, and Friday
5-7am
Or
8:30-9:30am

MEMBERS: \$45/month
NON MEMBERS: \$75/month

RIC NUBER YMCA
5885 Quince Rd, Memphis, TN 38119
P 901 682 8025 F 901 682 0783 ymcamemphis.org



U.S. MASTERS SWIMMING

USMS is a national membership-operated nonprofit organization that provides membership benefits to nearly 60,000 Masters swimmers across the country. Practices are on Monday, Wednesday, and Friday from 5-7am or 8:30-9:30am.

Payments will be billed monthly on the 1st day of the month via your checking account or credit card on file with the Y. **Autodraft MUST be set up at the Welcome Center or online.** Notification to stop monthly payments must be given prior to the 25th of the previous month. Notification must be sent via email to Bryan Parker at bparker@ymcamemphis.org.



Ric Nuber YMCA
5885 Quince Rd
Memphis, TN 38119
901-682-8025
www.ymcamemphis.org

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Non-Members: \$75/month

For more info, contact Bryan Parker,
Program Director at bparker@ymcamemphis.org

2017 U.S. Masters Registration Form

For Staff Use Only:			
Mbr#	_____	Amt Paid \$	_____
Cash	Check #	_____	Credit #
Date	___/___/___	Staff	_____

Participant's Name: _____ DOB _____ Age _____ _M _F

Email _____ Address _____

City _____ State _____ Zip _____ Primary Phone _____

Secondary Phone _____ 2nd Contact Person _____ Phone _____

Any Medical Concerns _____

Payments will be billed monthly on the 1st day of the month via your checking account or credit card on file with the Y. Please initial _____

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The YMCA of Memphis & the Mid-South will not assume responsibility for any injury incurred while participating in any athletic event, sports program, or any physically related activity. Nor will the YMCA of Memphis & the Mid-South be liable for lost or stolen items while program participants are using YMCA facilities or are on the YMCA premises. I, the undersigned for myself, my heirs and assigns do hereby release the YMCA of Memphis & the Mid-South, its employees and agents from any and all claims for injury, death, loss or damage I may suffer as a result of my participation. I also assume full responsibility for removing myself from any media opportunities that I do not wish to participate in.

Signature _____ Date _____