



# GRANITE STATE PENGUINS ATHLETIC CLUB 2023 QUARTERLY MEMBERSHIP APPLICATION

Last Name		First Name		MI
Street Address				
City/State/Zip			Date of Birth (mm/dd/yy)	Sex M F
Home Phone	Work Phone		Cell Phone	
E-mail Address				

OK to publish contact information in the password protected area of the web site? Y \_\_\_\_\_ N \_\_\_\_\_

**NOTE:** For insurance reasons, **all swimmers must** be members of US Masters Swimming. The Granite State Penguins Athletic Club requires that, when joining and at each renewal, each member and must provide a copy of their valid US Masters membership card or must provide proof of pending membership (such as a signed USMS registration form and check).

Payable to <u>Granite State Penguins</u>	
\$120 by quarter – M,W,F	\$120
\$45/mo for partial quarter	

**Requirements:**

- Deck Duty one time every month
- Deck Duty member will be responsible for COVID paperwork as required
- Member must sign up for deck duty for entire quarter before first day of practice
- Follow COVID protocols and guidelines

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Insurance requirements acknowledgements:

- *A US Masters member must be on deck at all times during practice. (lifeguard certification not required) You must be signed up for a future deck\_duty assignment whenever you swim. New members are granted a 2 week grace period before a deck duty signup is required.*

\_\_\_\_\_ *initial*

US Masters membership number \_\_\_\_\_ expiration date \_\_\_\_\_

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Do you have any medical condition that affects your ability to participate in physical activities or which could require special care in the event of an accident? Y \_\_\_\_\_ N \_\_\_\_\_

Please explain \_\_\_\_\_

.....  
Emergency contact: \_\_\_\_\_ Phone(s): \_\_\_\_\_

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WAIVER: I the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all the risks inherent in swimming (training and competition) including possible permanent disability or death, and agree to assume all of those risks. AS A CONDITION OF MY PARTICIPATION IN THE GRANITE STATE PENGUINS ATHLETIC CLUB SWIMMING PROGRAM OR ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES, INCLUDING ALL CLAIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: GRANITE STATE PENGUINS ATHLETIC CLUB OR INDIVIDUAL MEMBERS THEREOF, THE BOYS AND GIRLS CLUB OF GREATER NASHUA, OR ANY OTHER FACILITY USED BY THE GRANITE STATE PENGUINS ATHLETIC CLUB.

Member signature \_\_\_\_\_ Date \_\_\_\_\_