

Rocky Mountain Figure Skating Club 2010-2011 Membership Application

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|--|---|
| <input type="checkbox"/> Renewing Member <input type="checkbox"/> New Member <input type="checkbox"/> Associate Member (Home Club) _____ | |
| Family Last Name _____ | <input type="checkbox"/> Transferring (Previous Home Club) _____ |
| Mailing Address: _____ | |
| Home Phone: _____ | |
| Work/Cell Phone: _____ | |
| Has any of this changed since last year's registration? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| E-mail Address: (Needed for Club communications) | |

Please list skater first; fill in information for each member as it is to be listed on all USFSA documents

| | | | |
|--------------------|-------------------------|--|---|
| Member name | | Birth date | USA Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No |
| USFSA # | Membership Class | Check any that apply: <input type="checkbox"/> Parent/Guardian, <input type="checkbox"/> Coach, <input type="checkbox"/> Competitive Skater, <input type="checkbox"/> Rec. Skater, <input type="checkbox"/> Adult Skater, <input type="checkbox"/> USFSA Official, <input type="checkbox"/> Synchro, <input type="checkbox"/> Collegiate, <input type="checkbox"/> Club BOD | |
| Member name | | Birth date | USA Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No |
| USFSA # | Membership Class | Check any that apply: <input type="checkbox"/> Parent/Guardian, <input type="checkbox"/> Coach, <input type="checkbox"/> Competitive Skater, <input type="checkbox"/> Rec. Skater, <input type="checkbox"/> Adult Skater, <input type="checkbox"/> USFSA Official, <input type="checkbox"/> Synchro, <input type="checkbox"/> Collegiate, <input type="checkbox"/> Club BOD | |
| Member name | | Birth date | USA Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No |
| USFSA # | Membership Class | Check any that apply: <input type="checkbox"/> Parent/Guardian, <input type="checkbox"/> Coach, <input type="checkbox"/> Competitive Skater, <input type="checkbox"/> Rec. Skater, <input type="checkbox"/> Adult Skater, <input type="checkbox"/> USFSA Official, <input type="checkbox"/> Synchro, <input type="checkbox"/> Collegiate, <input type="checkbox"/> Club BOD | |
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ANNUAL MEMBERSHIP DUES FOR THE 2010-2011 YEAR

(Fees must be paid in full in order to process application!)

| MEMBERSHIP TYPE | DUES | NUMBER | TOTAL |
|--|----------|--------|-------|
| Individual Senior Membership (member 18 or older) | \$75.00 | | |
| 1 Junior (Under 18 years old) + 1 Senior Membership Package (Junior members must join with Senior Member) | \$110.00 | | |
| Additional Junior Membership (From same family) | \$30.00 | | |
| Additional Senior Membership (From same family) | \$40.00 | | |
| Introductory Junior Membership (1 st time RMFSC member. Does not require joining with Senior Member) | \$35.00 | | |
| Introductory Junior Membership (Subsequent years. Does not require joining with Senior Member) | \$45.00 | | |
| Associate Membership | \$40.00 | | |
| Honorary Membership or Official (application must be filled out) | \$0.00 | | |
| Professional Membership (application must be filled out) | \$0.00 | | |

Amount Enclosed (Checks Payable to RMFSC with "Membership" written in the memo line):\$ _____

Returned checks are subject to a \$20.00 returned check fee

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|--|
| Name of Primary Coach(es): _____ |
| Primary Coach(es) Phone & Email Address: _____ |

I understand that figure skating is a dangerous activity involving risk of serious injury and even death. Despite my knowledge of said risks, and in consideration of my being permitted to participate in RMFSC activities, I expressly and voluntarily agree to assume such risks and to hold harmless and free from any liability, injury or loss whatsoever, the Rocky Mountain Skating Club, Inc. ("RMFSC"), its officers, directors, members or agents. In addition, I hereby give permission for emergency medical treatment to the skater should that become necessary. I give my consent for my skater to be photographed during RMFSC functions or events and allow posting of pictures on the RMFSC website, programs, and documentation. By the acceptance of membership I agree to be bound by the bylaws and rules of RMFSC and agree to pay all membership fees as indicated on this application.

Member's signature _____ Date _____
 (Signature of parent/guardian if skater is under 18 years of age)

Typing you name on the signature text box line will constitute agreeing to the club liability and rules policy.

Gi Va JhH jg'z'fa VmWjW]b['cb'h Y'gi Va JhVi Hcb'UbX'a Uj'cf'd'UW'nei f'dUha Ybh]b'h Y'cW'Vcl]b'h Y'cW'Yf'fcca ' Uih Yf]b_ "

CF'!'return this form, the Volunteer Form, and Parent's Code of Conduct along with your payment to the Membership Officer in the skater's locked box -- OR-- Mail all forms and payment to: Brenda Bowers, 6650 W. 98th Place Westminster, CO 80021