

**ROCKY MOUNTAIN FIGURE SKATING CLUB  
APPLICATION TO TRANSFER MEMBERSHIP  
2011-2012 MEMBERSHIP YEAR**

**NOTE:** Skaters under 18 must join with an adult at the Junior/Senior membership level. Please complete all information requested. All waivers and forms must be signed and payment received in full before your transfer application will be processed.

<b>Family Last Name</b>	<b>Previous Home Club</b>
<b>Mailing Address:</b>	<b>Home Phone:</b>  <b>Work <input type="checkbox"/>/Cell Phone <input type="checkbox"/>:</b> <b>(check one)</b>
E-Mail Address: (To be used for club communication purposes only; will not be shared with third parties)	

**MEMBER INFORMATION: PLEASE PROVIDE ALL INFORMATION; LIST SKATER(S) FIRST; SEE CHART (ATTACHMENT A) TO DETERMINE MEMBERSHIP CLASS**

<b>Member Name</b>		<b>Birth date</b>	<b>USA Citizen</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>USFSA #</b>	<b>Membership Class</b>	<b>Check any that apply:</b> <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	
<input type="checkbox"/> Skater <input type="checkbox"/> Parent <b>Please check</b>	<b>Current Freeskate Level</b>	<b>Primary Coach(es) Name, E-Mail &amp; Phone</b>	
<b>Member Name</b>		<b>Birth date</b>	<b>USA Citizen</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>USFSA #</b>	<b>Membership Class</b>	<b>Check any that apply:</b> <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	
<input type="checkbox"/> Skater <input type="checkbox"/> Parent <b>Please check</b>	<b>Current Freeskate Level</b>	<b>Primary Coach(es) Name, E-Mail &amp; Phone</b>	
<b>Member Name</b>		<b>Birth date</b>	<b>USA Citizen</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>USFSA #</b>	<b>Membership Class</b>	<b>Check any that apply:</b> <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	
<input type="checkbox"/> Skater <input type="checkbox"/> Parent <b>Please check</b>	<b>Current Freeskate Level</b>	<b>Primary Coach(es) Name, E-Mail &amp; Phone</b>	

**TYPE OF MEMBERSHIP DESIRED (All memberships entitle members to participate in social events, club ice, club education and will be included in club e-mails). The membership year for all levels is June 30 through July 1 of each year. Fees are not prorated by US Figure Skating nor RMFSC. If you have questions regarding the correct membership level for you, please check with your coach or the Membership Chair.**

MEMBERSHIP LEVEL	TRANSFER FEES	NUMBER	TOTAL DUES
Individual Senior (18 or older)			
Junior/Senior (One skater under the age of 18 and one parent; junior members must join with senior member)			
Additional Junior Member (from same family)			
Additional Senior Member (from same family)			
<b>TOTAL AMOUNT DUE (please make check payable to "RMFSC" (Returned checks are subject to a \$20.00 return check fee)</b>			

By signing below, I request that my membership(s) be transferred to Rocky Mountain Figure Skating Club. **I understand and acknowledge that in order to be considered by club funding, I must be a full member of RMFSC for the previous membership year (July 1 through June 30) and my membership must be renewed by June 30 of the year funding is applied for, with no lapse in membership. I also understand that the requirements of the Club's Volunteer Policy must be satisfied to be considered for club funding and any funding will be determined based on the Club's bylaws.**

I(we) understand that figure skating is a dangerous activity involving risk of serious injury and even death. Despite my(our) knowledge of said risks, and in consideration of being permitted to participate in RMFSC activities, I(we) expressly and voluntarily agree to assume such risks and to hold harmless and free from any liability, injury or loss whatsoever, the Rocky Mountain Figure Skating Club, Inc. ("RMFSC"), its officers, directors, members or agents.

I, the member, or I, the parent/legal guardian of my skater, give consent for emergency medical treatment by any licensed physician, hospital or clinic, including transportation for myself, ourselves and/or said participant for any injuries that may arise from participation in Club activities.

I have read, signed and agree to abide by U.S. Figure Skating's Parent Code of Conduct.

I agree to abide by and follow the rules established by The Ice Centre at the Promenade.

I understand that RMFSC is a volunteer organization whose primary existence is to encourage development of its members through educational and competitive programs. I have read the Volunteer Policy of RMFSC and agree to its terms. I understand that not abiding by the terms of the RMFSC Volunteer Policy will render my membership not in good standing.

I give consent for myself or 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(we) agree to be bound by the bylaws and policies of RMFSC and agree to pay all fees as indicated on this application. I understand and acknowledge that in order for my membership to be in good standing, I must fulfill all of my(our) obligations to the Club.

All members over the age of 18 must sign the membership application.

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

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

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