



Membership application 2008-2009 Figure Skating Club of Park City

Skater Information	
Skater Name: _____	Date of Birth: _____ Sex: M F
Mailing Address: _____	City/State: _____ Zip: _____
Home Phone: (____) _____	Work Phone: (____) _____ Cell Phone: (____) _____
Skater's Email _____	Expected year of graduation from high school: _____ US Citizen? Yes No
New _____ Renewal _____	Transfer from: _____ USFSA #: _____
Coach(es): _____	Current USFSA Home Club _____
Last USFSA Tests Passed:	
Moves in the Field: _____	Free Skate: _____ Dance: _____ Pairs: _____ Figures: _____

Parent/Guardian and Advocate Information for Minor Members	
Mother/Guardian Name: _____	E-mail: _____ Employer: _____
Home Phone: (____) _____	Work: (____) _____ Cell: (____) _____
Father/Guardian Name: _____	E-mail: _____ Employer: _____
Home Phone: (____) _____	Work: (____) _____ Cell: (____) _____

Membership Selection	Program	Club Ice & Class	Free-style Ice	Fees
I hereby apply for (Select one):				
<input type="checkbox"/> Full Member: \$135	Full Year	<input type="checkbox"/> \$340	<input type="checkbox"/> \$210	Membership \$ _____
<input type="checkbox"/> Half Yr: \$95	Back To School 8/28-10/16	<input type="checkbox"/> \$105	<input type="checkbox"/> \$60	Club Ice & Class \$ _____
<input type="checkbox"/> Second Family Mbr: \$95	Fall 10/23-12/18	<input type="checkbox"/> \$105	<input type="checkbox"/> \$60	Freestyle Ice \$ _____
<input type="checkbox"/> Half Yr: \$55	Winter 1/8-2/26	<input type="checkbox"/> \$105	<input type="checkbox"/> \$60	Volunteer Opt Out \$ _____
<input type="checkbox"/> Associate Member: \$50	Spring 3/5-4/23	<input type="checkbox"/> \$105	<input type="checkbox"/> \$60	Donation \$ _____
<input type="checkbox"/> Skating Professional, Judge, Acct. \$40				-----
<input type="checkbox"/> Adult Member: \$75				
<input type="checkbox"/> Full Season Membership: includes Full Member, Full Year Club Ice & Lesson and Full Year Freestyle Ice \$650 before 8/29/08				Total \$ _____

Candidate/Parent/Guardian Signature & Release	
<p>I agree to abide by the Bylaws and Rules of the FSCPC and those of the US Figure Skating Association. I give permission to print my name, address, email address, and phone number in a Club Directory unless designated below. At all times, on or off the ice, I will maintain high standards of behavior while representing the Figure Skating Club of Park City. The undersigned agrees to hold harmless the USFSA, the FSCPC, and the Park City Ice Arena and all their employees and agents from any and all loss, damage, and/or injury that may be sustained by the member in any manner while participating in any of the activities of the FSCPC.</p>	
SIGNATURE: _____	_____ I do not authorize my information to be published in a club directory.
Signature of applicant or parent if applicant is under 18	

Where to send Application & Check	Club Use Only
Amount Enclosed: \$ _____ Check Number: _____ Make Checks Payable to: FSCPC Membership Send to: FSCPC, PO BOX 982556, Park City, UT 84098	Membership Approved? Yes No _____ Signature of Membership Chair Date

Full Membership Volunteer Service Policy	
<input type="checkbox"/> I have read, understand and will abide by the Club's Volunteer Service Policy. <input type="checkbox"/> I would like to opt-out of my Volunteer requirement by paying \$150 per skater.	
_____ skater signature (or parent if skater is a minor)	

Please print or type legibly. Application must be submitted to FSCPC with all fees and release forms.

One form per member please.

For questions, contact FSCPC Membership Chair at coni@parkcityfigureskating.com



Dear prospective member of the Figure Skating Club of Park City,

Welcome to the 2008–2009 season of the Figure Skating Club of Park City. This is our second season to offer a club membership, and as you will see, both our vision for the club and the services we are offering to our members have increased!

This year, we are offering club members each week, two hours of club ice, including a 30 minute lesson, and one hour of club freestyle ice, during the school year. We will also be providing a variety of social activities and clinics for skaters. Please review the “Membership Benefits” page of the application packet for a complete list of membership benefits. Also, please review the “Figure Skating Club of Park City Rules” page for a more complete understanding of the operation of the club.

The Figure Skating Club of Park City is a Member Club of the United Skates Figure Skating Association. Your full membership will include a one year USFSA membership, including a subscription to Skating magazine.

Please complete your membership application in its entirety. Additionally, we are requesting that you submit e-mail addresses (parent’s and skater’s, if applicable). Email is our preferred method for communicating with our members. Please fill out all pages of the application, as incomplete forms cannot be approved. Required pages are:

- Membership Application
- Consent for Medical Attention or Treatment / Emergency Contact Information
- Media Release / Skaters Etiquette and Code of Ethics
- Waiver and Release of Liability / Parental Consent form

Forms may be submitted by mail at the following address, or in the designated box at the Park City Ice Arena desk.

Membership
Figure Skating Club of Park City
PO Box 982556
Park City, UT 84098

We look forward to your participation in the club!

Sincerely,

Coni Lansche
President, Membership Chair
Figure Skating Club of Park City
coni@parkcityfigureskating.com

Membership Types

Full Home-Club Member: \$135 (\$85 after 1/1/08)

- Skater receives all FSCPC benefits.
- Includes a voting membership (for parent/guardian if under age 18)

Full Home-Club Member, 2nd family member: \$95

- Skater has a sibling who is a Full Home-Club member of FSCPC.
- Skater receives all FSCPC benefits.
- If skater is over age 18, is a voting member.

Associate Club Member: \$50

- Skater's principal home club is another USFSA club.
- Skater receives FSCPC communications
- Skater may not represent FSCPC in competitions
- Eligible for group number participation in exhibitions and shows presented by FSCPC.
- Club night participation may be purchased at an additional charge per event.

Skating Professional, Judge, Accountant \$40

- May be members of the Club as either Home or Second Club members.
- Home members shall be entitled to vote.
- Professionals may be granted skating and teaching privileges, subject to the approval of the Board of Directors in accordance with such policies, terms and conditions as the Board of Directors may prescribe.
- Includes Restricted members.

Adult Member \$75

- Must have a viable interest in figure skating
- Includes voting privileges
- Over 18 years old
- Eligible for election to FSCPC Board of Directors.

Lifetime or Honorary Member (by invitation)

- For the purpose of recognizing an individual's contribution to the club.

Club Sponsors and Supporters

- Supporter whose interest is in supporting the efforts and activities of the club
- May be an individual, a family, a business, corporation or organization
- Sponsorship Levels: Bronze \$25 and over, Silver: \$100 and over, Gold: \$500 and over. Platinum \$1000 and over.
- Not a membership
- Does not include voting privileges

FUNDING: Member dues cover a portion of FSCPC's annual budget. However, FSCPC must raise funds to supply the remainder of the funds needed for the budget. All members need to support these fundraisers for our Club's continued success.

ADDITIONAL FIGURE SKATING EXPENSES: FSCPC makes every attempt to keep costs to a minimum. In addition to annual membership fees, members can expect to pay additional money to participate in Club Ice & Class, competitions, test sessions, and possibly shows and clinics. FSCPC members may enjoy some of these events at discounted rates.

VOLUNTEER SERVICE POLICY: The FSCPC will require a contribution of 10 hours of service for each Full Membership and 2nd Family Membership. Associate Club memberships and members joining after January 1st will be required to contribute 5 hours of volunteer service prior to the close of the membership year. Members can opt to pay a \$150 fee per skater in lieu of volunteering. The success and growth of the Club depends on each family being committed and supporting the Club through volunteer hours.

Membership Benefits

As a Full Home-Club member of FSCPC, you enjoy the following benefits.

- **FSCPC Club Ice & Class:** Opportunity to participate in exclusive club ice time and figure skating classes.
- **Clinics & Seminars:** Opportunity to participate in all clinics sponsored by FSCPC.
- **Show Performances/Exhibitions:** Opportunity to participate in FSCPC shows.
- **FSCPC Club Activities & Seminars:** Participate in FSCPC Club Night activities, including our fall social and holiday parties. Associate members may pay an additional fee per event.
- **FSCPC Communications:** Receive FSCPC newsletters and informational notices
- **FSCPC Photo and Directory:** Receive a FSCPC Club photo, have your picture posted on our bulletin board and receive a FSCPC information directory.
- **FSCPC Voting Privileges:** If over 18, vote on issues at the General Membership meetings.
- **Skater Support:** When funding is available, FSCPC supports skaters who compete at regional, sectional and national levels.
- **FSCPC Discounts and Privileges:** Receive discounts on FSCPC sponsored figure skating events, and be eligible to work as an ice monitor.
- **USFSA membership:** Member of United Skates Figure Skating (USFS)
- **Skating magazine:** Receive *Skating* monthly issues of magazine (one per household).
- **Test Sessions:** Eligible to take USFS figure skating tests and receive certificates, patches and recognition for tests passed
- **Competitions:** Eligible to compete in USFS sanctioned figure skating competitions.

Club Ice & Class

Club Ice & Class sessions will consist of a 30 minute figure skating class that will vary in content from week to week (i.e. stroking & edges, moves in the field, ice dancing, synchronized skating, jumps and spins) and 45 minutes of freestyle ice time. Skaters can schedule private lessons with one of the club coaches during this time for an additional fee.

There will be four programs during the season, each consisting of seven Club Ice & Class sessions.

Program Fees (Program Fees must be paid by the Fees Due by date, see below.)

Full Year (all four programs)	\$ 340
Individual Program	\$ 105

Program	Dates
Back to School	08/28/08 – 10/16/08
Fall Class	10/23/08 – 12/18/08
Winter Class	01/08/08 – 02/26/08
Spring Class	03/05/08 – 04/30/08

Club Freestyle Ice:

Full Year	\$210
Individual Program	\$ 60
Session	\$ 10

*Payment Plans may be available by request.

FIGURE SKATING CLUB OF PARK CITY RULES

1. The Club relies on volunteers to meet all of its staffing needs. All full club member families are strongly encouraged to volunteer at least ten (10) hours of service for the club each year. You might be contacted by a committee chairman or the volunteer coordinator for specific volunteer assignments. If you would like to help but have a special situation, please contact an FSCPC board member or the volunteer coordinator. Please record your hours and submit them to the volunteer coordinator.
2. Membership dues cover on the direct costs the club incurs on behalf of your skater. All additional budget items associated with operating the club must be covered by fundraisers. All members are encouraged to participate in club fund-raising activities so that dues will not have to be raised to cover operational costs.
3. All members must keep their membership dues current. In addition, competition forms, test fees, ice fees and any other monies paid for skating costs to FSCPC must be current. If not, the skater is not a member in good standing and will not be allowed to test, compete, or exhibit.
4. All club members must sign and agree to abide by the Code of Ethics and Skater's Etiquette Rules.

CONSENT FOR MEDICAL ATTENTION OR TREATMENT

I, the participant, or I, the parent/guardian of said participant, hereby give my consent to the Figure Skating Club of Park City and the Park City Ice Arena or the facility in which the activities are taking place and their staff and to members of Figure Skating Club of Park City, their Board of Directors and volunteers to obtain medical care from any licensed physician, hospital or clinic, including transportation and emergency medical services, for myself/ourselves and/or said participant for any injury that occurs during the course of participation in any Figure Skating Club of Park City activity.

Name of Member (Please print.)

Member Signature _____ Date _____
(If over 18 year's of age.)

Name(s) of Parent(s)/Guardian(s), if under 18. (Please print.)

1st Parent/Guardian Signature _____ Date _____

2nd Parent/Guardian Signature _____ Date _____

This Consent for Medical Attention shall be binding and effective for the 2008/2009 membership year of the Figure Skating Club of Park City.

EMERGENCY CONTACT INFORMATION

Contact #1 Name _____ Relationship _____

Primary Phone _____ Alt Phone _____

Contact #2 Name _____ Relationship _____

Primary Phone _____ Alt Phone _____

Contact #3 Name _____ Relationship _____

Primary Phone _____ Alt Phone _____

Notes / Comments:

MEDIA RELEASE

From time to time, during the Figure Skating Club of Park City activities or events, participants may be videotaped or photographed. Images of you and/or your child may appear on the FSCPC website or bulletin board. An FSCPC directory is also published annually, for internal member use only. By signing this agreement, you give permission for your membership information to be included. Participating will not jeopardize a skater's U.S. Figure Skating eligibility.

I, the undersigned, do hereby grant FSCPC the right to use my and/or my child's name and likeness in photographs and/or video of myself/him/her in my/his/her association with the Figure Skating Club of Park City in all media, for use in Club business, such as website, brochures, local media coverage, and other such purposes. Such purposes, however, shall not include any commercial endeavors. I understand that release and consent given herein, is made without compensation and no compensation is required or anticipated.

_____	_____	_____
Skater's Name	Signature (Skater or Parent/Guardian if under 18)	Date

SKATER'S ETIQUETTE AND CODE OF ETHICS

- For safety reasons, chewing gum, cellular phones, and head sets are not permitted on the ice.
- The skater having their program music played has the right of way. Please be considerate and try to stay out of their way.
- No kicking or swearing on the ice.

Members are to be thoroughly familiar with the Skater's Etiquette, outlined above, the bylaws and rules of the Figure Skating Club of Park City; comply with those rules in full; and to exemplify the highest standard of fairness, ethical behavior and genuine good sportsmanship in any of their relations with others. Any person whose acts, statements or conduct is considered detrimental to the welfare of amateur figure skating or the Figure Skating Club of Park City is subject to the loss of privilege of registration by said club.

I agree to and will abide by the Figure Skating Club of Park City bylaws, rules and regulations or forfeit my membership.

_____	_____	_____
Skater's Name	Skater Signature	Date
	_____	_____
	Parent/Guardian Signature (if under 18)	Date

Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (“Agreement”)

In consideration of participating in Figure Skating Club of Park City activities, I represent that I understand the nature of figure skating activities (“activity”) and that I am qualified, in good health and in proper physical condition to participate in such “activity”. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the “activity”.

I fully understand that this “activity” involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the “activity”, the conditions in which the “activity” takes place, or the negligence of the “releasees” named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in the “activity”.

I hereby release, discharge, and covenant not to sue Figure Skating Club of Park City, United States Figure Skating, its directors, officers, administrators, sponsors, volunteers, agents, employees, staff, instructors, trainers, other participants and if applicable, owners and lessors of premises on which the “activity” takes place (each considered one of the “Releasees” herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the “releasees” or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk, I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the releasees from any loss, liability, damage, or cost which any may incur as the result of such claim.

Figure Skating Club of Park City has the right, but not the obligation, to provide rules, regulations and/or ice monitors for the activity. I hereby acknowledge that Figure Skating Club of Park City shall not be responsible for the supervision of the members at the activity.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

_____	_____	_____
Printed Name of Participant	Signature of Participant	Date
_____	_____	_____
Printed Name of Witness	Signature of Witness	Date

PARENTAL CONSENT AND INDEMNIFICATION AGREEMENT

I, the minor’s parent and/or legal guardian, understand the nature of the above referenced activities and the minor’s experience and capabilities and believe the minor to be qualified to participate in such “activity”. I hereby release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses, or damages on the minor’s account caused or alleged to have been caused in whole or in part by the negligence of the Releasees (as defined above) or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor’s behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasees may incur as the result of any such claim.

_____	_____	_____
Printed Name of Parent/Guardian	Signature of Parent/Guardian	Date
_____	_____	_____
Printed Name of Witness	Signature of Witness	Date