



2018-2019

## Casper Figure Skating Club Membership Application

Adult Skater or Parent/Guardian Information			
Adult Skater or Parent/Guardian Name:		USFSA #:	
Address:		City:	
Home Phone:	Cell Phone:	Email:	
Emergency Contact:		Relationship:	
Skater Information:			
Name:	DOB:	Age:	USFSA#
1.			
2.			
3.			
4.			

All dues (CFSC and USFSA) must be paid before skater will be allowed to participate in CFSC activities. Per CFSC Bylaws, an adult membership in USFSA is required for each full membership of a minor skater.

Additional Member Information:			
Name:	DOB	USFSA #	non voting / voting
1.			<input type="checkbox"/> non voting <input type="checkbox"/> voting
2.			<input type="checkbox"/> non voting <input type="checkbox"/> voting
3.			<input type="checkbox"/> non voting <input type="checkbox"/> voting
4.			<input type="checkbox"/> non voting <input type="checkbox"/> voting

Your date of birth is required as CSFC is requiring that all volunteers complete the USFSA Safesport Ethics training and background checks. This fee is included in your USFSA membership fee. Once you have been enrolled in USFSA by CSFS you will receive a membership number that you will use to access their website and complete the training. See below for examples of volunteer opportunities. OR if you have been a previous member of USFSA please include your number above so that you can be properly credited for the completed training.

Membership Definitions	
<b>Learn-to-Skate Membership:</b>	Required for anyone participating in the Learn-to-Skate Program with no plans to test at higher levels. Must be paid in full in September.
<b>USFSA Introductory Fee:</b>	Required for first-time full memberships with USFSA. Must be paid in full in September.
<b>USFSA Full Membership:</b>	Required for first family member and anyone testing through USFSA levels (not Learn-to-Skate). Annual membership includes USFSA membership, SKATING magazine, accident insurance, senior voting rights in club, scholarship fund for competitions/testing. Must be paid in full in September. Fee also includes costs of Safe sport ethics training and background check for Adult members
<b>USFSA Subsequent (Additional) Family Member Fee:</b>	Required for each additional family member. Must be paid in full in September. This is a non-voting member. This includes CSFC required safe sport ethics training, and background check for all volunteers.
<b>USFSA Subsequent (Additional) Family Member Fee:</b>	Optional for each additional family member. Must be paid in full in September. This is a senior voting rights as a club member. This includes CSFC required safe sport ethics training, and background check for all volunteers..
<b>Collegiate Member Fee:</b>	Good for 4 consecutive years. Must be attending college or university. Must be paid in full in September.
<b>CFSC Dues:</b>	Annual required dues for each member. Includes ice time, coaching, t-shirt, annual show. Please choose one of the following options... 1st half \$175, 2nd half \$175 and \$100 fundraising requirement, 3 hour volunteer requirement
<b>Syncro:</b>	Syncro Team members receive an extra 30 minutes of ice time each week and a separate costume. Therefore an extra charge of \$100 is required for the season. 1st half \$50, 2nd half \$50

Fees Owed				
Skater is:		Yes	No	Fee
Learn to Skate Fee	\$20.00			
USFSA Intro Fee	\$20.00			
USFSA Full Membership	\$60.00			
USFSA Additional non voting member	\$24.00			
USFSA Additional senior voting member	\$60.00			
Collegiate Member Fee	\$70.00			
CSFS Membership	\$350.00			
Syncro Fee	\$100.00			
Payment options: CSFS membership and Syncro can be paid in two installments NLT 9/30/18 & 1/27/19. All USFSA fees must be paid NLT 9/30/18 or the skater will not be allowed on the ice.			Total Fee	
			Due NLT 9/30/18	Due NLT 1/27/19

I agree to pay CSFS according to the above payment schedule: \_\_\_\_\_  
Signature
Date

Paid: \$ \_\_\_\_\_ Method (ck#, Cash, Inv, CC) \_\_\_\_\_ Date: \_\_\_\_\_ Int; \_\_\_\_\_

Paid: \$ \_\_\_\_\_ Method (ck#, Cash, Inv, CC) \_\_\_\_\_ Date: \_\_\_\_\_ Int; \_\_\_\_\_

# 2018-2019 CASPER FIGURE SKATING CLUB FUNDRAISING

**In addition to the above dues, each skater is required to raise \$100 for CFSC through club fundraisers.** For families with multiple skaters, the fundraising requirement is capped at \$250 per family. There will be various fundraising opportunities throughout the year. Each fundraiser will have a minimum amount to raise, after the minimum amount is reached the excess raise will be split between the CSFC and the skater.

For example: advent calendars are sold at \$5.00 per calendar and cost \$3.00. the skater is required to sell 15 calendars. The profit of \$2.00 per calendar would be split into \$1.00 to CFSC and \$1.00 would go towards the skaters upcoming dues.

**Any unmet fundraising requirement will be added to the second-half dues.**

**I have read the above statement and the Parent/Member Handbook and agree to the same:**

Parent/Guardian Name:	Signature:	Date:
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Fundraiser:	Min Req:	Date started:	Money Due Date:
# picked up:	Date:	Extra Funds Raised:	Credit towards dues

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# picked up:	Date:	Extra Funds Raised:	Credit towards dues

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Fundraiser:	Min Req:	Date started:	Money Due Date:
# picked up:	Date:	Extra Funds Raised:	Credit towards dues

# 2018-2019 CASPER FIGURE SKATING CLUB REQUIRED VOLUNTEERING

CSFC would not be possible without the amazing support of the parents and family members of each skater. We rely on your the three (3) required volunteer hours per skater in order to complete the season. CSFC is requiring that all volunteers complete the USFSA Safesport Ethics training and background checks. This fee is included in your USFSA membership fee. Once you have been enrolled in USFSA by CSFS you will receive a membership number that you will use to access their website and complete the training. This training must be completed prior to you being able to volunteer. We encourage you to complete this training a.s.a.p. so that you have all opportunities to volunteer. Examples of opportunities to fulfill your three required volunteer hours are:

- manning the table at skate swaps
- assisting with packaging the advent calendars
- helping set up, break down decorations for the show performance in December.
- assisting the skaters in the locker rooms for show and competition
- being a runner for the competition
- manning a table at the competition

We will have sign-up sheets available for you to sign up. It takes a village for these events to be successful; we thank you in advance for your time and support.

Volunteering requirements will be considered as part of a member's good standing in the club. Members not in "good standing" will not be able to participate in CFSC and USFSA activities.

## Description of Agreement

### Initial

\_\_\_\_\_ I understand my financial obligations and agree to pay dues to CFSC and USFSA (via CFSC)

\_\_\_\_\_ I understand and agree to my fundraising responsibility

\_\_\_\_\_ I understand and agree to my volunteering responsibility

\_\_\_\_\_ I understand and agree with the Soloist Information

\_\_\_\_\_ I give my consent as the parent/guardian of my participant for Casper Figure Skating Club to obtain medical care in the event of an emergency including but not limited to transportation, hospital, doctor expenses, etc. This Consent for Medical Attention or Treatment shall be binding and effective for the 2017-2018 membership year of CFSC.

\_\_\_\_\_ I understand that by signing and agreeing to the skaters and parents codes of conduct, that upon violation of such code of conduct, my membership with CFSC may be revoked at any time per stipulations set forth in the club bylaws.

\_\_\_\_\_ I understand and agree to the "Media Release"

\_\_\_\_\_ 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.

\_\_\_\_\_ I, the parent and/or legal guardian of the minor(s), understand the nature of the above referenced "activity" and the minor's experience and capabilities and believe the minor(s) 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 by or alleged to have been caused in whole or in part by the negligence of the "Releasees" or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor(s), 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 and "Releasees" may incur as the result of any such claim.

**By Initialing the statements above I agree to all stipulations and requirements in this document.**

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Skater: \_\_\_\_\_ Date: \_\_\_\_\_

Skater: \_\_\_\_\_ Date: \_\_\_\_\_

Skater: \_\_\_\_\_ Date: \_\_\_\_\_

Skater: \_\_\_\_\_ Date: \_\_\_\_\_

## MEDICAL RELEASE

I certify that I, the member, or I, the parent/guardian of said participant, give my consent to the Casper Figure Skating Club and the facility the activities are taking place in and their staff and to members of the Casper Figure Skating Club, 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 could arise from participation in these activities. This Consent for Medical Attention or Treatment shall be binding and effective for the 2018-2019 membership year of the Casper Figure Skating Club.

Parent or Guardian Signature \_\_\_\_\_  
Date \_\_\_\_\_

## MEDIA RELEASE

Members of CFSC may be photographed or videotaped for marketing or promotional purposes. In order for you or your child to be included in these activities we will need written permission. Please read and sign below.

I, the undersigned, do hereby grant to Casper Figure Skating Club the right to use my/my child's name and likeness in photographs and/or video of myself/him/her in my/his/her association with Casper Figure Skating Club in all media for use in Club business such as website, brochures, posters, 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.

Parent or Guardian Signature \_\_\_\_\_  
Date \_\_\_\_\_

