

## Findlay Silver Blades Figure Skating Club USFS Club #2996

## Membership Application

July 1, 2022 to June 30, 2023

|   | Please check the appropriate box:   |                     |          |         |          |               |               |  |  |  |  |
|---|---|---------------------|----------|---------|----------|---------------|---------------|--|--|--|--|
|   |   | Renewal             | □ Ne     | w Mem   | ber [    | Transfer from | another club  |  |  |  |  |
|   | Home Club Membership includes FSBFSC use of Open Paid Free style time with use of punch card or walk on fee and U.S. Figure Skating Membership. |                     |          |         |          |               |               |  |  |  |  |
|   | Membership Fees   |                     |          |         |          |               |               |  |  |  |  |
|   | ☐ First Family I  | Member (Include     | izine)   | \$80.00 |          |               |               |  |  |  |  |
|   | ☐ Subsequent  |                     | \$40.00  |         |          |               |               |  |  |  |  |
|   | ☐ Collegiate (Ir  |                     | \$100.00 |         |          |               |               |  |  |  |  |
|   | ☐ Introductory  |                     | \$50.00  |         |          |               |               |  |  |  |  |
|   | $\square$ Professional  |                     | \$65.00  |         |          |               |               |  |  |  |  |
|   | PSA Number (Required for disc   |                     |          |         |          |               | ed pro rate.) |  |  |  |  |
| * Please note that membership fees are due upon receipt and will not be prorated.  * Make checks payable to:  * Send completed forms and payment to:  Findlay Silver Blades FSC  Findlay Silver Blades FSC  c/o Professional Committee  P.O. Box 206  Findlay, OH, 45839-0206 |   |                     |          |         |          |               |               |  |  |  |  |
|   | mily Member:  |                     |          |         |          |               |               |  |  |  |  |
|   |   |                     |          |         |          |               | DOB           |  |  |  |  |
|   | ressCity/State/Zip<br>ilPhone   |                     |          |         |          |               |               |  |  |  |  |
|   |   | U.S. Citizen        |          |         |          |               |               |  |  |  |  |
|   |   |                     |          |         |          |               |               |  |  |  |  |
| Coache  | s Name  |                     |          |         | Coach Em | <br>ail       |               |  |  |  |  |
|   | nal Family Me   |                     |          |         |          |               |               |  |  |  |  |
|   |   |                     |          |         | LISE     | S #           | DOB           |  |  |  |  |
|   |   |                     |          |         |          |               |               |  |  |  |  |
|   |   |                     |          |         |          |               |               |  |  |  |  |
| □ Male  | ☐ Female  | U.S. Citizen        |          |         |          |               |               |  |  |  |  |
|   |   |                     |          |         |          |               |               |  |  |  |  |
| Coache  | oaches Name Coach Email   |                     |          |         |          |               |               |  |  |  |  |
|   |   |                     |          |         |          | S #           | DOB           |  |  |  |  |
|   |   |                     |          |         |          |               |               |  |  |  |  |
| Email   |   | City/State/ZipPhone |          |         |          |               |               |  |  |  |  |
| · ·   |   | U.S. Citizen        | ☐ Yes    | □ No    |          |               |               |  |  |  |  |
| Current   | Levels  |                     |          |         |          |               |               |  |  |  |  |
| Coache  |   |                     |          |         | Coach Em | ail           |               |  |  |  |  |

## Please complete both pages of this application!

Membership application will not be processed without a completed waiver!

## MEMBERSHIP AGREEMENT, WAIVER, AND RELEASE OF LIABILITY

In consideration for being allowed to participate in any skating or related activities sponsored by the Findlay Silver Blades Figure Skating Club and by signing below, I acknowledge that:

- 1. Membership in the Findlay Silver Blades Figure Skating Club (FSBFSC) and participation in FSBFSC activities is a privilege and that my membership may be revoked in accordance with procedures established in the FSBFSC bylaws.
- 2. From time-to-time FSBFSC will take pictures at club events and post these pictures. I agree that Findlay Silver Blades Figure Skating Club may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.
- 3. I have read the FSBFSC Bylaws and Handbook and agree to support and abide by the provisions for membership as outlined therein. I agree to conduct myself in accordance with the established behavior guidelines contained in the U.S. Figure Skating bylaws, rules, and other publications.
- 4. The risk of injury from the activities involved as a skater is significant, including the potential for permanent paralysis and death, and while particular rules, equipment and personal discipline may reduce the risk, the risk of serious injury does exist. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of others and assume full responsibility for my participation.
- 5. I willingly agree to comply with the stated and customary terms and conditions for participation in any FSBFSC event. If I observe any significant hazard during my presence or participation, I will remove myself from participation and will immediately bring such to the attention of the nearest official.
- 6. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless FSBFSC, its officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and leasers of premises used to conduct the event ("releasees"), with respect to any and all injury, disability, death, or loss or damage to person or property, even if arising from the negligence of the releases or otherwise. I have also reviewed, signed in agreement with the concussion agreement set for by Findlay Silver Blades Figure Skating Club.

| For Office Use: Date Rcvd   | Chk Date   | Chk #   | Chk Amt                            |  |  |
|---|--|---|------------------------------------|--|--|
| Parent/Guardian's Sig   | nature   | Date Signed   |                                    |  |  |
| Parent/Guardian's Nam   | e (Printed)  | Parent/Guardian's Email                               |                                    |  |  |
| FOR PARTICIPANTS OF MINORITY A<br>This is to certify that I, as parent/guar<br>release as provided above of all the R<br>to indemnify the Releasees from an<br>provided above, even if arising from | dian with legal responsibi<br>Releasees, and, for myself<br>y and all liabilities incide | lity for this participant<br>f, my heirs, assigns, an | d next of kin, I release and agree |  |  |
| EOD DARTICIDANTS OF MINIORITY   | AGE lundor ago 19 at tin   | on of registration):                                  |                                    |  |  |
| Participant's Signature (For members A  | Age 18 or older)   |   | Date Signed                        |  |  |
|   |  |   |                                    |  |  |