

Glenwood Figure Skating Club

Application for Membership USFSA Membership – July 1, 2011 – June 30, 2012

Name _____ Address _____

City _____ State _____ Zip _____ Phone _____

Parent/Guardian Email _____ Skater email _____

Date of Birth _____ Mother's Name _____ Father's Name _____

Are you currently a member of the USFSA or a USFSA Club? _____ If yes, club name _____

Coach's Name _____ Coach's Name _____

Please check only one box

<input type="checkbox"/> Senior Member	Over 18 years of age, may test, volunteer hours required, may vote	\$90
<input type="checkbox"/> Junior Member	Under 18 years of age, may test, volunteer hours required, parent entitled to vote	\$90
<input type="checkbox"/> Introductory Member	First time members to a USFSA club, other than Basic Skills	\$75
<input type="checkbox"/> Synchro Team Member	Member of a USFSA Synchro Team, may not test, requested but not required to volunteer.	\$75
<input type="checkbox"/> Collegiate Member	Must be a full-time student at a College or University, One time 4-year membership, may test, entitled to vote.	\$135
<input type="checkbox"/> Professional	Must be a member of PSA, no volunteer hours required.	\$60
<input type="checkbox"/> Special Senior/Skating Director	Over 18 years of age, non-skating member, may not test, may vote and hold office.	\$55
<input type="checkbox"/> Ladybug Member	Offered to skater one time only, after January 1 st , may test and compete.	\$60
<input type="checkbox"/> Secondary Member	Primary member of another club, may test without additional fee, requested but not required to volunteer.	\$45
Please make check payable to: Glenwood Figure Skating Club		
Return to: May Wiza 3134 Monterey Flossmoor, IL 60422		
Questions: Contact May Wiza: mayfsc@aol.com or (708) 957-4063		

Primary Activity

(Check one only)

- | | | |
|---|--|--|
| <input type="checkbox"/> Competitive Skater | <input type="checkbox"/> Recreational Skater | <input type="checkbox"/> Collegiate Skater |
| <input type="checkbox"/> USFSA Officer/Official | <input type="checkbox"/> Club Officer/Board Member | <input type="checkbox"/> Coach/Choreographer |
| <input type="checkbox"/> Parent/Guardian | <input type="checkbox"/> Skating Director | <input type="checkbox"/> Other |

Check all activities that apply:

- | | | |
|---------------------------------------|--|---|
| <input type="checkbox"/> Adult Skater | <input type="checkbox"/> Synchro Member | <input type="checkbox"/> Collegiate Skater |
| <input type="checkbox"/> Coach | <input type="checkbox"/> Parent/Guardian | <input type="checkbox"/> Club Officer/Volunteer |

As a parent of a Junior, Introductory, or a Senior member of the GFSC, I understand that I shall be required to volunteer 8 hours of time during the 2010-2011 Skating Season. I further understand that if I do not work the required eight (8) hours, a \$75 per family fee shall be assessed.

I agree to accept the constitution and bylaws set forth by the GFSC and to comply with the rules, regulations, policies and skating manner issued by its governing bodies. I further agree to allow GFSC to post pictures and information about its' members on the Glenwood WEB site.

Signature of applicant _____ Parent/Guardian if under 18 _____

(Unsigned applications will not be accepted.)

Indicate where you are willing to volunteer for the 2010-2011 Skating Season

Ladybug

<input type="checkbox"/> Accounting	<input type="checkbox"/> Ice Monitoring	<input type="checkbox"/> Decorations	<input type="checkbox"/> Announcing
<input type="checkbox"/> Transportation	<input type="checkbox"/> Awards & Trophies	<input type="checkbox"/> Practice Ice	<input type="checkbox"/> Hospitality
<input type="checkbox"/> Food Donation	<input type="checkbox"/> Registration	<input type="checkbox"/> Runner	<input type="checkbox"/> Marketing/Ad Book

Club Ice
 State-wide USFSA Events || Seminars | I will pay the \$75 Volunteer Fee |
| Other (Please explain) | |

Membership Fee \$ _____

Volunteer fee, if applicable \$ _____

Check # _____