



St. Lawrence Figure Skating Club
 Application for Membership: U.S. Figure Skating Program
 2007 – 2008

Name (First, Middle Initial, Last)	Sex (M/F)	Date of Birth

Parent/Guardian Name(s): _____

Address: _____

Telephone numbers: Home: _____ Work: _____ Cell: _____

e-mail: _____

USFS Test Passed	Free Skate:	Dance:	Moves:
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Level	Requirements	Price
Associate		\$ 40
Junior	FS: No test – PreJuv; Dance: None – PreSilver	\$420
Senior	FS: PreJuv – Senior; Dance: PreSilver and up	\$470

Level: _____

Price: \$ _____

Payment plans: You may pay in full, in two installments, or in three installments. A minimum of 1/3 of the total due must be paid at the time of registration (non-refundable). The 2nd payment is due on 12/15 and the balance must be paid in full no later than February 15, 2008.

U.S. Figure Skating Registration Fee: + \$ _____
 (\$35.00 unless already paid for 2007-08)

Fundraiser + \$ 25.00

TOTAL DUE = \$ _____

Down Payment (non-refundable) - \$ _____

BALANCE DUE = \$ _____

Please make checks out to: SLFSC

“I acknowledge that the St. Lawrence Figure Skating Club is not liable for injuries or damages that may be incurred or suffered by my child or myself in his/her/my participation in the club. In order that I or my child be permitted to be enrolled in the club and participate in its activities, I acknowledge all of the foregoing and waive any claims for damages and injuries caused or sustained by my child or myself arising out of his/her/my participation in said program and hereby hold harmless and indemnify said club from all of the same.”

In addition, I will ensure that either I or a responsible adult will be present the entire time my child is on the ice or at the skating arena, and that I will ensure that my child is on the ice only during his or her assigned skating time.

 Parent/Guardian/Adult Skater Signature

 Date

Board Member use only			
Record of Payments:	1	2	3
Amount			
Date, Ch# or Cash			

Profile: (circle all that apply)

Competitive Adult
 Recreational Collegiate
 Synchro