

Hollydell Figure Skating Club, Inc.

2017-2018 Member Registration

Date: _____

Please complete and return this Member Registration Form, plus all copies of the U.S. Figure Skating Member Registration Form(s), signed Visual Material and Interview Release Forms, Checks payable to The Hollydell Figure Skating Club.

Hollydell FSC, Inc.
P.o. Box 472
Sewell, NJ 08080
www.hollydellfsc.org
president@hollydellfsc.org

MEMBER'S NAME: _____ USFSA # _____

STREET: _____ ARE YOU A NEW MEMBER? _____

CITY: _____ STATE: _____ ZIP: _____ - _____ US CITIZEN? _____

PHONE # (____) _____ AGE: _____ BIRTHDAY: ____/____/____ SEX: _____

CELL PHONE# _____ → EMAIL ADDRESS: For club updates: _____

ARE YOU CURRENTLY A TEACHING SKATING PROFESSIONAL? _____ PSA # _____

THE HIGHEST APPLICABLE TEST LEVEL YOU HAVE PASSED AS OF THE DATE OF THIS APPLICATION:

_____ BADGE PROGRAM _____ FREESTYLE _____ MOVES IN THE FIELD _____ DANCE

**** This information is REQUIRED for all PARENT MEMBERSHIPS ****

PARENT / GUARDIAN NAME: _____ OCCUPATION: _____

STREET (if different than skaters): _____

CITY: _____ STATE: _____ ZIP: _____ - _____ US CITIZEN? _____

PHONE: (____) _____ BIRTHDAY: ____/____/____ SEX: _____ ARE YOU A NEW MEMBER? _____

Volunteers are very important to the success of our club! Let us know your area(s) of interest or your expertise:

_____ Club / Special Events _____ Testing Sessions / Competitions _____ Organizing Club Sales
_____ Hospitality _____ Chair a Committee _____ Serving on the Board

_____ **First Time Members to USFSA** \$70
_____ **Renewals** Early Bird (by May 31st) \$100
Regular (June 1th – June 30th) \$115
Late after (June 30th) \$130
Half Year (after January 1st) = \$85

_____ **Sibling Member:** \$49.00 In Addition to Primary Member at all Times

_____ **Subsequent Non-skating Membership (parents/guardians)** \$ 24.00 (All Voting Rights Apply)

_____ **Associate Member *** \$55 Each Skating Member, After January 1st, = \$25

*Name of Home Club (Associates Only): _____

_____ **Coach and Judge Membership** \$60

_____ **Collegiate Membership** \$70 for 4 years (can be purchased at any point while skater is in college)

****New applicants to Hollydell FSC required a club member to sponsor them and approval of the board. If membership is denied, all submitted fees shall be refunded. ****

Total Enclosed: _____

MEDICAL RELEASE (Parent/Guardian Signature Required with Registration)

In consideration of my/our participation in any U.S. Figure Skating Association program or Basic Skills activity, I acknowledge that I understand the nature of the activity and that I, and/or my minor child, am qualified, in good health, and in proper physical condition to participate in such activity. I acknowledge that if conditions are unsafe, I, and/or my minor child, will immediately discontinue participation in the activity.

I fully understand that skating involves risks of serious bodily injury, including permanent disability, paralysis, and death, and that these and other risks may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the Releasers named below; and that there may be other risks either not known to me or not foreseen 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 the Hollydell Figure Skating Club, the U.S. Figure Skating Association or its Member Clubs, their respective administrators, directors, agents, officers, volunteers, and employees, and any sponsors and advertisers of any USFSA-sanctioned event in which I participate (each considered one of the Releasers herein) from all liability, claims, demands, losses, or damages arising out of the gross negligence of, or intentional, willful or wanton misconduct of the Releasers. If I, or anyone on my and/or my minor child's behalf makes a claim which does not arise from the gross negligence of, or intentional, willful or wanton misconduct of Releasers against any of the Releasers, I will indemnify, defend, save, and hold harmless each of the Releasers from any loss, liability, damage, or cost which may incur as the result of such claim.

I acknowledge that I have read this release, waiver of liability and express assumption of risk agreement and fully understand it.

Member's Signature: _____ Date: _____

Parent/Guardian Signature if Member is under the age of 18: _____ Date: _____

Revised May 11, 2017

**Hollydell Figure Skating Club, Inc.
2017-2018 Visual Material and Interview Release Form**

(PLEASE PRINT)

Name of Participant: _____ Relationship: _____

Name of Participant: _____ Relationship: _____

I hereby give permission to the Hollydell Figure Skating Club or to the local media to interview and/or take photographs, slides, movies, DVD's, or videotapes of the above name participant(s). In addition, I give permission to the Hollydell Figure Skating Club to use these interviews, photographs, slides, movies, DVD's or videotapes in its publications (other than the Club's Web page on the Internet) and presentations and in material that may be circulated to media (newspapers, radio, television, etc.). I am aware that the above named participants may be part of videos, DVD's and/or photographs that will be sold to parents, family members and customers. I understand and agree that I will make no claim for compensation for use of these written or visual materials. I also agree to release and discharge the Hollydell Figure Skating Club from all claims and demands of any nature whatsoever arising from or with respect to the use of any interviews, photographs, slides, movies, DVD's or videotapes.

_____ I give _____ I do not give _____ permission to the Hollydell Figure Skating Club or local media to interview and/or take photographs, slides, movies, DVD's or videotapes of myself and/or my child.

Signature of Participant: _____ Date: _____

Signature of Parent/Guardian for Minors: _____ Date: _____

AND

The Hollydell Figure Skating Club publishes a variety of information about our Club and our activities on a portion of the internet known as the World Wide Web. From time to time, we may wish to include the above name participant(s) name and/or photograph on our Web page. This information might be published in order to recognize the participant(s) achievements or in conjunction with activities of the Club on the Web. Your signature below acknowledges permission for this information to be published on the World Wide Web.

_____ I give _____ I do not give _____ permission to the Hollydell Figure Skating Club or local media to include myself and/or my child's name or photograph on the World Wide Web.

Signature of Participant: _____ Date: _____

Signature of Parent/Guardian for Minors: _____ Date: _____

This/These release(s) shall continue in effect for the 2017-2018 Hollydell Figure Skating Club membership year unless the Club receives written notice to terminate the release(s). Such termination shall not affect the use of any pictures taken before the notice of termination.

**Please return this form to the Hollydell Figure Skating Club, Inc.
Hollydell Ice Arena**



601 Hollydell Drive
P.O. Box 472
Sewell, NJ 08080



Or contact:

**Rebecca Hargrave, President
president@hollydellfsc.org**