

## Northwoods Figure Skating Club 2018-2019 Membership Registration Form

| Skaters Name:  | Known Medical Conditions or Concerns:  |
|--|--|
| Address:   |  |
| City, State, Zip:  | Type of Membership   |
|  | 2018-2019 Fee for New Members to NFSC is \$16.00   |
| Date of Birth:   | Learn to Skate Registration #:   |
| Parent/Guardian:   | Existing NFSC Learn to Skate & Free Skate Membership for 1 Year \$35.00  |
| Home Phone:  | NFSC Freestyle Full Membership for 1 Year \$70.00  |
| Work Phone:  | ** Membership year is July 1 through June 30 **  |
| Cell Phone:  |  |
| Email Address:   | Associate Membership 1 Year \$60.00  |
| Emergency Contact:   | Please list club(s) you are an associate member of and   |
| Emergency Phone:   | Coach(es):   |
| Physician:   | Please circle your home rink:  |
| Clinic:  | CUMBERLAND RICE LAKE SPOONER   |
| All NFSC families are required to volunteer a minimum of <b>1-hour per session</b> . Please check one option below:  | Additional information:  |
| I will volunteer 1 hour per session I choose to pay the buyout in the amount \$50.00 per session.  |  |
| Hold Harmless/Emergency Medical Treatment: I hereby authorize Northwoods Figure Skating Club (NFSC) through its representatives, to obtain emergency medical treatment for above named skater. Further, I request that above skater is allowed to participate in NFSC activities, both on and off the ice, and release the NFSC, its members, and its coaches from any responsibility for injuries to above named skater during NFSC activities. I understand that there is a risk of serious injury from these activities.  Signature (Parent/Guardian must sign if skater is under 18) | Consent for Photo Release: I hereby give consent to the Northwoods Figure Skating Club (NFSC) to display skating related photographs of above named skater including, but not limited to, the NFSC website, Facebook, video & audio productions, advertising or promotional materials or any other media for the club. I release NFSC from any and all liability that may arise in connection with such use. I am the parent or legal guardian of skater listed and have legal authority to execute this consent and release.  Signature (Parent/Guardian must sign if skater is under 18) |

\_Date\_\_\_\_\_

\_Date\_\_\_\_