

2018-2019 Manitowoc County Figure Skating Club Membership

Membership Types:

Membership dues, 20 volunteer hours & 2 fundraisers

- Full Membership- \$110 Parent & skater (under 18 years old)
- Additional family members- \$40 per person
- Adult Membership (18 & older)- \$80
- *Collegiate Member- \$80* Skater must be a full time college student.
*Collegiate Membership- This is a 4-year membership. Skater is required to do 6 hours of volunteer and 1 fundraiser each year

MCFSC Volunteer Hours: 20 hours per family

- 12 hours of Public Skate-
2 public skates (2 people per public skate) family needs to sign-up by October 31st or dates will be assigned. Any public skate not fulfilled will be billed to the family at \$50 per public skate
- 8 hours of Volunteer Hours - sign-up sheet at registration or watch the bulletin board. LTS classes count for volunteer hours ½ hr per class

Any volunteer hours that are not completed will be billed to the family at \$20 per hour

MCFSC Fundraisers :

- Dip Fundraiser 20 packets of dips or \$50 buyout November 2018
- Skate-A-Thon \$100 minimum per family January 2019

Benefits of Joining Manitowoc County Figure Skating Club include:

- U.S. Figure Skating Membership July 1st- June 30th
- Subscription to U.S. Figure Skating Magazine "Skating"
- Skater can test and compete at USFS test sessions and competitions

2018-2019 Manitowoc County Figure Skating Club Membership

Family Name: _____

EMAIL: _____

Skater #1

Name: _____

Birthday: _____

Address: _____

USFS#: _____

City/State/Zip: _____

FS Level: _____

Phone #: _____

Coach: _____

Parent Names: _____

Parent Cell#: _____

Parent Member- if skater is under 18

Name: _____

Birthday: _____

Address: _____

USFS#: _____

City/State/Zip: _____

Cell#: _____

Skater #2

Name: _____

Birthday: _____

Address: _____

USFS#: _____

City/State/Zip: _____

FS Level: _____

Phone #: _____

Coach: _____

Parent Names: _____

Parent Cell#: _____

Skater #3

Name: _____

Birthday: _____

Address: _____

USFS#: _____

City/State/Zip: _____

FS Level: _____

Phone #: _____

Coach: _____

Parent Names: _____

Parent Cell#: _____

MCFSC membership

___ Full Membership- \$110 Parent & skater (under 18 years old)

___ Additional Family Member(s) \$40 per person

___ Adult Membership (18 & older)- \$80

___ Collegiate Member- \$80 *4 year membership for full time college student

*Per year 6 volunteer hours & 1 fundraiser

___ **Total Membership Fees(no payment plans on membership)** ___ **Check #** ___ **Cash**

___ 20 Volunteer Hours per family (12 public Skate hours + 8 volunteer hours)

___ 2 Fundraisers per family (Dip fundraiser & Skate-A-Thon)

___ I give permission for my skater to be photographed by MCFSC

MCFSC Club Member Signature or Parent Signature if skater under 18

Date

Manitowoc County Figure Skating Club

Skater Emergency Form

This form needs to be filled out and turned in with membership forms. Both parents/guardians must sign this emergency form.

Skater Name: _____

Birth Date: _____

Address: _____

City/State/Zip: _____

Phone #: _____

Father Name: _____

Father Work#: _____

Father Cell#: _____

Mother Name: _____

Mother Work#: _____

Mother Cell#: _____

If a parent cannot be reached - a relative or friend who will assume temporary care of your child

#1 Name: _____ Relationship: _____

Cell # _____

#2 Name: _____ Relationship: _____

Cell # _____

Health Information

Please list any serious illnesses, severe allergies or chronic conditions:

Any medication

Insurance Information:

Medical Insurance: _____ Insurance#: _____

Dental Insurance: _____ Insurance#: _____

Hospital Preference: _____

Doctor: _____ Phone #: _____

Dentist: _____ Phone #: _____

Parent/Skater if over 18 Signature or Parent Signature if skater under 18

Date

