

2019-2020 Manitowoc County Figure Skating Club Membership

Membership: Membership dues, 20 volunteer hours & 2 fundraisers

- Full Membership- \$110 Parent & skater
 - Additional family members- \$40 per person
 - Adult Membership (18 & older)- \$80
 - Collegiate Member* \$80 4-year membership must be a full time college student
- *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 October/November
- 2020 Skate-A-Thon \$100 minimum per family January 18, 2020

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

2019-2020 Important Dates to Remember

- October 6th Welcome Back Night for Club and LTS
- October 8th all Club and LTS programming will begin
- January 10-12 Fox Cities
- January 30- February 2 Badger State
- March 20-22 Ice show

Send all 4 forms & Check to: MCFSC

PO BOX 357

Manitowoc, WI 54221-0357

2019-2020 Manitowoc County Figure Skating Club Membership

Family Name: _____

EMAIL: _____

Skater #1

Name: _____

Birthday: _____

Address: _____

USFS#: _____

City/State/Zip: _____

FS Level: _____

Phone #: _____

Coach: _____

Parent Names: _____

Grade In School: _____

Parent Cell#: _____

School: _____

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

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

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

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

and are required to do 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

Send all 4 forms & Check to: MCFSC

PO BOX 357

Manitowoc, WI 54221-0357

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: _____
Address: _____
City/State/Zip: _____

Birth Date: _____

Phone #: _____

Father Name: _____
Father Cell#: _____

Father Work#: _____

Mother Name: _____
Mother Cell#: _____

Mother Work#: _____

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

#1 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 #: _____

Skater if over the age of 18 years old

Date

Parent/Guardian Signature if skater is under 18 years old

Date

PARENTAL CONSENT AND INDEMNIFICATION AGREEMENT

I, the minor's parent and/or legal guardian, understand the nature of the above referenced activities and the minor's experience and capabilities and believe the minor to be qualified to participate in such "activity". I hereby release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses, or damages on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claims against any of the above Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasees may incur as the result of any such claim.

Skater's Name

Printed Name of Parent/Guardian if skater is under 18 years old

Signature of Parent/Guardian

Date

Consent for Medical Attention or Treatment

I certify that I, the member, or I, the parent/guardian of said participant, give my consent to the _____ Manitowoc County Figure Skating Club _____ and the facility the activities are taking place in and their staff and to members of the _____ Manitowoc County Figure Skating Club _____, their Board of Directors and volunteers to obtain medical care from any licensed physician, hospital or clinic, including transportation and emergency medical services, for myself/ourselves and/or said participant for any injury that could arise from participation in these activities.

Skater's Name- Print

Skater's Signature if over 18 years old

Parent(s)/Guardian(s) Names -Print

Parent(s)/Guardian(s) Signature if skater is under 18 years old

This Consent for Medical Attention shall be binding and effective for the 2019 – 2020 membership year of Manitowoc County Figure Skating Club.