



## ***Santa Rosa Figure Skating Club, INC.***

1667 West Steele Lane, Santa Rosa, California 95403

The Santa Rosa Figure Skating Club welcomes you to the 2017/2018 year! Attached are the forms you need to renew your membership to the club and US Figure Skating. An explanation of the membership classifications is on the following page. It is important that each application form be fully completed.

The Santa Rosa Figure Skating Club membership year (*and therefore, the volunteer requirements year*) runs from July,1 2017 through June 30, 2018. **If you wish to participate in club sessions, test sessions, or competitions, you must renew your membership ten days prior to testing, competing or beginning club sessions.** Those of you entering competitions this summer need to return your application as soon as possible.

**If you plan to participate at the Central Pacific Regional Championship's, Qualifying or Non Qualifying, in October 2017, YOU MUST RETURN THIS PAPERWORK NO LATER THAN AUGUST 20 to allow time for processing of your membership paperwork. If US Figure Skating does not receive your membership in time, you will not be allowed to skate at Regionals.**

Information about club sessions will be posted on the Club Bulletin Board. Our first club session will be in August 2017.

We look forward to seeing you at the events planned for the coming membership year. Volunteers will be needed for all club events, so please check for information on the club bulletin board or our website at [www.srfsc.org](http://www.srfsc.org) for upcoming activities. Our club has an excellent reputation for hosting well-run events; this is made possible only through the efforts of our members.

**Make checks payable to: The Santa Rosa Figure Skating Club**

**MAIL TO:** Santa Rosa Figure Skating Club  
ATTENTION: MEMBERSHIP  
1667 WEST STEELE LANE  
SANTA ROSA, CA 95403

A \$50 fee will be assessed on returned checks.

## MEMBERSHIP CLASSIFICATIONS

In order to participate in any SRFSC session, test, or event skaters are required to be members of the Santa Rosa Figure Skating Club and US Figure Skating.

The club offers the following membership categories:

**Introductory Member (Parent and One child under 18 years): \$160.00 for first year**

This category is for new members who have never been a member of US Figure Skating or have been a Basic Skills member.

**Introductory Member – (Additional Skater or Skaters): \$45.00 for first year**

This category is for Introductory Members with more than one child skater under 18.

**Returning Regular Member (Parent and One family member): \$185.00 per year**

This category is for the Parent and one family member. This can include a parent or guardian of a skater (necessary if the skater is under the age of 18).

**Additional Returning member: \$65.00 per year**

This category of membership is for any additional skater(s) under 18 years in a family.

**Adult Skaters, Judges & Coaches: \$105.00 per year**

The category is for Adult Skaters (over 18), Judges and Coaches.

**Collegiate Member: \$105.00**

This is a Four (4) year membership category. This category is for members going off to College who still want to remain a member of SRFSC. This onetime fee covers an entire four years of college as long as member is enrolled.

**Sponsor Member: \$65.00 per year**

Must be eighteen (18) years or older. **Cannot be the representing adult member of a minor.** May use no more than one (1) hour of Club session time per week. A sponsor member cannot participate in any club shows, competitions, testing, or in any event that requires a full club membership. Sponsor members are not be eligible to vote and cannot hold office. Sponsor members are not required to work a specific number of volunteer hours but are encouraged to help out whenever they would like to.

**Special Needs Skaters:**

Special needs skaters are those with physical or mental limitations that require specialized coaching while on the ice.

**Associate Members: \$65.00 per year**

Associate members are those who have a Home Club membership with another Club, but who wish to also be a member of our Club.

***PLEASE READ, COMPLETE AND SIGN THE SECTIONS ON THE FOLLOWING PAGES***



# 2017/2018 MEMBERSHIP APPLICATION

## PARENT/JUDGE/COACH/ADULT SKATER/COLLEGIATE

**PLEASE NOTE: ALL FIELDS MUST BE COMPLETED**

Check one:

- Introductory Member** (has never had membership in US Figure Skating)  
 **SRFSC Renewal – Required for renewal - US Figure Skating Number** \_\_\_\_\_  
 **Transfer**  
Required for transfers: Previous Home Club \_\_\_\_\_ US Figure Skating Number \_\_\_\_\_

### APPLICANT PROFILE

Name \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender:  M  F  
(required for US Figure Skating Registration)

Address \_\_\_\_\_  
Street City State Zip

Phone (\_\_\_\_) \_\_\_\_\_ Alternate Phone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_  
(**required** to receive club communications)

If youth: Parent or guardian's name \_\_\_\_\_ Relationship \_\_\_\_\_

Applicant's **primary activity** (check only **ONE**):

- Adult Skater  Recreational Skater  Parent/Guardian  Judge  
 Competitive Skater  Coach  Club Officer/Board Member  Other \_\_\_\_\_

Check any others that apply:

- Adult Skater  Recreational Skater  Parent/Guardian  Judge  
 Competitive Skater  Coach  Club Officer/Board Member  Other \_\_\_\_\_

Have you ever been reinstated as an eligible person? \_\_\_\_\_

### MEMBERSHIP TYPE

- PARENT & ONE Family mbr - \$185** **OR**  **INTRODUCTORY MEMBERSHIP--PARENT & ONE Family mbr - \$160**  
 **Additional Skater(s)/Family member(s) - \$65**  **Introductory Membership – Additional Skater(s) - \$45**  
 **ADULT SKATER, JUDGE or COACH - \$105**  **Sponsor Member - \$65**  
 **COLLEGIATE** (4-year membership) - **\$105**  
 **Associate Membership - \$65**  
Required for Associate Membership - Home Club (**must be current for 2017/2018**) \_\_\_\_\_

In consideration of the approval of this membership, I agree to be bound by and to abide by the Bylaws and Rules of the SRFSC, including the Code of Conduct, Policies and Procedures and Volunteer hours requirements and the terms and conditions of Safe Sport. I understand that my membership is subject to approval by the SRFSC Board of Directors and that the total dues are due and payable upon signing and submitting this application form. My signature below indicates that I have read, understand, and agree to the above terms.

**APPLICANT'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PLEASE READ, COMPLETE AND SIGN THE SECTIONS ON THE FOLLOWING PAGES**



# MEMBERSHIP APPLICATION

**MINOR SKATER & ADDITIONAL MEMBERS** July 1, 2017 – June 30, 2018

**PLEASE NOTE: ALL FIELDS MUST BE COMPLETED**

Check one:

- Introductory Member** (has never had membership in US Figure Skating)
- SRFSC Renewal – Required for renewal - US Figure Skating Number** \_\_\_\_\_
- Transfer**

Required for transfers: Previous Home Club \_\_\_\_\_ US Figure Skating Number \_\_\_\_\_

## APPLICANT PROFILE

Name \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender:  M  F  
(required for US Figure Skating Registration)

Address \_\_\_\_\_  
Street City State Zip

Phone (\_\_\_\_) \_\_\_\_\_ Alternate Phone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_  
(**required** to receive club communications)

If youth: Parent or guardian's name \_\_\_\_\_ Relationship \_\_\_\_\_

Applicant's **primary activity** (check only **ONE**):

- Adult Skater  Recreational Skater  Parent/Guardian  Judge
- Competitive Skater  Coach  Club Officer/Board Member  Other \_\_\_\_\_

Check any others that apply:

- Adult Skater  Recreational Skater  Parent/Guardian  Judge
- Competitive Skater  Coach  Club Officer/Board Member  Other \_\_\_\_\_

Have you ever been reinstated as an eligible person? \_\_\_\_\_

In consideration of the approval of this membership, I agree to be bound by and to abide by the Bylaws and Rules of the SRFSC, including the Code of Conduct, Policies and Procedures and Volunteer hours requirements and the terms and conditions of Safe Sport. I understand that my membership is subject to approval by the SRFSC Board of Directors and that the total dues are due and payable upon signing and submitting this application form. My signature below indicates that I have read, understand, and agree to the above terms.

**APPLICANT'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PLEASE READ, COMPLETE AND SIGN THE SECTIONS ON THE FOLLOWING PAGES**

**PARENT/GUARDIAN AND MINOR SKATERS WAIVER AND CONSENT FORM**

**WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AGREEMENT**

In consideration of membership in The Santa Rosa Figure Skating Club and participation in club activities, I represent that I understand the nature of figure skating activities ("activity") and that I am qualified, in good health, and in proper physical condition to participate in such "activity". I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the "activity".

I fully understand that this "activity" involves risk of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of other persons participating in the "activity", the conditions in which the "activity" takes place, or the negligence of the "releasees" named below; and that there may be other risks either not known to me or not readily foreseeable 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 am aware that ice skating is an inherently dangerous sport and at the undersigned's sole risk I hereby agree to release and hold harmless Redwood Empire Ice Arena, Redwood Empire Ice Arena, LLC, Redwood Empire Ice Operations, LLC, Jean F. Schulz, The Charles M. Schulz Museum and Research Center, Schulz Investment Limited Partnership, Woodstock Ice Productions, The Santa Rosa Figure Skating Club and US Figure Skating, and the respective directors, officers, agents and employees of each of them (the "releasees") from any and all loss, damage, and/or injury, whatsoever kind or nature, that may be sustained by the entrant in any manner while participating in any event, competition or activity associated herewith. The Santa Rosa Figure Skating Club has the right, but not the obligation, to provide rules, regulations and/or ice monitors for Club ice. I hereby agree and acknowledge that The Santa Rosa Figure Skating Club shall not be responsible for the supervision of the members on Club ice.

I have read this WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AGREEMENT, and understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

Name of Participant (skater) \_\_\_\_\_  
(please print)

Signature of Participant \_\_\_\_\_ 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 any claims against any of the above Releasees, I WILL DEFEND 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.

Name of Parent/Guardian \_\_\_\_\_  
(please print)

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**ADULT SKATER, JUDGE AND COACH WAIVER AND CONSENT FORM**

**WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AGREEMENT**

In consideration of membership in The Santa Rosa Figure Skating Club and participation in club activities, I represent that I understand the nature of figure skating activities ("activity") and that I am qualified, in good health, and in proper physical condition to participate in such "activity". I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the "activity".

I fully understand that this "activity" involves risk of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of other persons participating in the "activity", the conditions in which the "activity" takes place, or the negligence of the "releasees" named below; and that there may be other risks either not known to me or not readily foreseeable 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 am aware that ice skating is an inherently dangerous sport and at the undersigned's sole risk I hereby agree to release and hold harmless Redwood Empire Ice Arena, Redwood Empire Ice Arena, LLC, Redwood Empire Ice Operations, LLC, Jean F. Schulz, The Charles M. Schulz Museum and Research Center, Schulz Investment Limited Partnership, Woodstock Ice Productions, The Santa Rosa Figure Skating Club and US Figure Skating, and the respective directors, officers, agents and employees of each of them (the "releasees") from any and all loss, damage, and/or injury, whatsoever kind or nature, that may be sustained by the entrant in any manner while participating in any event, competition or activity associated herewith. The Santa Rosa Figure Skating Club has the right, but not the obligation, to provide rules, regulations and/or ice monitors for Club ice. I hereby agree and acknowledge that The Santa Rosa Figure Skating Club shall not be responsible for the supervision of the members on Club ice.

I have read this WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AGREEMENT, and understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

Name of Participant (skater) \_\_\_\_\_  
(please print)

Signature of Participant \_\_\_\_\_ 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 any claims against any of the above Releasees, I WILL DEFEND 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.

Name of Parent/Guardian \_\_\_\_\_  
(please print)

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_



## EMERGENCY INFORMATION

### IN THE EVENT OF AN EMERGENCY

Skater's Name \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_  
Mother's Name

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

\_\_\_\_\_  
Father's Name

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

\_\_\_\_\_  
Family Member or Friend's Name

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

\_\_\_\_\_  
Health Insurance Plan

\_\_\_\_\_  
Group Number

\_\_\_\_\_  
Physician's Name

\_\_\_\_\_  
Phone Number

Any known medical conditions, drug allergies, food allergies, etc.  
\_\_\_\_\_

List all medications prescribed, including dosage:  
\_\_\_\_\_

### 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 Santa Rosa Figure Skating Club and the facility the activities are taking place in and their staff and to the members of The Santa Rosa 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.

Name of Minor Child Member \_\_\_\_\_  
(please print)

Name of Parent/Guardian \_\_\_\_\_  
(please print)

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Name of Adult Member \_\_\_\_\_  
(please print)

Signature of Adult Member \_\_\_\_\_ Date \_\_\_\_\_

This consent for Medical Attention shall be binding and effective for the 2015/2016 membership year of The Santa Rosa Figure Skating Club

As a member of the SRFSC each family has agreed to work at least 12 volunteer hours per year to assist the club. We are able to host competitions, shows, and exhibitions only with your volunteer help, and we thank each of you for any assistance you can provide.

**Please note that in lieu of volunteer hours you agree to a payment of \$120.00.**

SKATERS NAME: \_\_\_\_\_ Home Phone# \_\_\_\_\_

Work Phone# (if OK to use) \_\_\_\_\_ E-Mail \_\_\_\_\_

Please check an area or areas where you would like to work. As asterisk (\*) indicates an area where a skater 13 years or older may volunteer.

Registration\* \_\_\_\_\_ Obtain Advertising for Program \_\_\_\_\_

Runner \_\_\_\_\_ Flower/Merchandise Sales\* \_\_\_\_\_

Ice Monitor\* \_\_\_\_\_ Goodie Bags, obtaining donations \_\_\_\_\_

Hospitality: \_\_\_\_\_ (Assist with serving food & beverages for event officials)

NOTE: If you check several areas, you may receive several calls. And you may volunteer in more than one area for each event.

Other: If there are tasks you do, other than those described above, which may be approved by the Board as valid club volunteer hours, please tell us about it here.

**Please ensure that any hours worked outside of a specific club event are reported to the Volunteer Hours coordinator so that you get credit for them.**

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Are you really great at organizing things? Do you have other talents the club could use? Can you provide or obtain goods or services the club can use? Remember, we may not have thought of the thing you do best; we need your help so please describe what you would be interested in doing or providing.

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**THANK YOU!!**