

WINCHESTER FIGURE SKATING CLUB

P.O. Box 1093, Burlington, MA 01803

MEMBERSHIP APPLICATION 2018-19

SKATER INFORMATION						
Skater's Last name:		Skater's First name:			USFS Number:	
Street address:			Home Phone:		Cell Phone:	
City:		State:	Zip Code:		Coach's Name:	
Birth date: / /		Age:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F	School Attending (2018-19):		Grade (2018-19):
Highest Test Passed:	Are you a member of another FS club? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, which club?		Will you represent WFSC? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Parent/Guardian Name(s):				Parent/Guardian Email:		

MEMBERSHIP TYPE						
Please select one of the membership types below:						
Type	Cost	Description	May Contract Ice?	May receive Bulk-rate Ice Pricing?	Volunteer Requirement	Contract Requirement
<input type="checkbox"/> Full	\$175	Membership for an individual skater who may represent WFSC at competitions and test. Benefits include: <ul style="list-style-type: none"> • Member walk-on and contract pricing. • Ability to contract ice at bulk-rate pricing. • Priority and discount for club test sessions. • USFS membership & subscription to Skating Magazine. • Voting rights and ability to hold office, if over age 18. 	Yes	Yes	10 hours (or \$200)	1 ice time per week
<input type="checkbox"/> Introductory	\$75	First time (one-time only) membership for an individual skater who has never before been a member of any figure skating club. Benefits are the same as for Full Members.	Yes	Yes	5 hours (or \$100)	None
<input type="checkbox"/> Adult	\$175	Membership for an individual skater who is over 18 years of age. The member may walk-on and contract at member rates. The member will receive the bulk-rate pricing. The member is eligible to vote and hold office.	Yes	Yes	None	None
<input type="checkbox"/> Non-Representing	\$125	Membership for an individual skater who is a representing member of a different USFS club. Benefits and volunteer requirements are the same as for a Full member, except the membership does <i>not</i> include USFS membership. Also, the member is not eligible to vote or hold office.	Yes	Yes	10 hours (or \$200)	None
<input type="checkbox"/> Collegiate	\$70	Membership for an individual skater who is enrolled in a college or university. Price listed is for a four-year membership and is for a maximum of four years. The member may contract ice, but will <i>not</i> receive the bulk-rate pricing. The member is not eligible to vote or hold office.	Yes	No	None	None
<input type="checkbox"/> Non-Skating	\$60	Membership for a non-skating individual. The member is not eligible to skate on WFSC ice times. If over 18 years of age, the member may vote and hold office.	No	No	None	None

ICE PRICING					
This is provided for informational purposes. Ice contracts will be distributed and collected before the start of the Fall/Winter/Spring sessions.					
Membership Type	Walk-on Rate	Contract or Coupon Rate (Bulk-rate pricing - varies by # of purchased sessions per week)			
		1 ice time / week	2 ice times / week	3 ice times / week	4+ ice times / week
Full / Intro / Adult / Non-Rep	\$18	\$16	\$15	\$14	\$13
Collegiate	\$18	\$16	\$16	\$16	\$16
Non-Member	\$20	not available	not available	not available	not available

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

In consideration of participating in Winchester Figure Skating Club activities, I represent that I understand the nature of figure skating activities ("activity") and that I, and/or my minor child, are 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, and/or my minor child, will immediately discontinue participation in the "activity".

I fully understand that this "activity" involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others 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 hereby release, discharge, and covenant not to sue the Winchester Figure Skating Club, United States Figure Skating, its directors, officers, administrators, sponsors, volunteers, agents, employees, staff, instructors, trainers, other participants and if applicable, owners and lessors of premises on which the "activity" takes place (each considered one of the "Releasees" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk, I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the releasees from any loss, liability, damage, or cost which any may incur as the result of such claim.

The Winchester Figure Skating Club has the right, but not the obligation, to provide rules, regulations and/or ice monitors for Club Ice. We hereby acknowledge that the Winchester Figure Skating Club shall not be responsible for the supervision of the members at Club Ice.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, 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.

x

Signature of Participant (if age 18 or over)

Date Signed

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.

x

Signature of Parent/Guardian (if participant is under age 18)

Date Signed

USFS SAFESPORT STATEMENT

Winchester Figure Skating Club (WFSC) is committed to creating a safe and positive environment for members' physical, emotional and social development and ensuring that it promotes an environment free of misconduct.

The following code of conduct applies to all participants in activities hosted, supported, sponsored or engaged in by U.S. Figure Skating and WFSC including but not limited to competitions, exhibitions, training camps and local rink activities.

I recognize that my participation or my child's in all the activities associated with U.S. Figure Skating and WFSC is an honor and privilege that carries certain responsibilities. I agree to fully abide by the rules and guidelines set forth by U.S. Figure Skating or its properly designated agents.

USFS Member Code of Conduct GR 1.02

I recognize that my participation in all activities hosted, supported, sponsored or engaged in by U.S. Figure Skating, including but not limited to competitions, exhibitions and training camps, is an honor and privilege that carries certain responsibilities. I agree to fully abide by the rules and guidelines set forth by U.S. Figure Skating or its properly designated agents. As a precondition to participation in activities hosted, supported, sponsored or engaged in by U.S. Figure Skating, I will adhere to the following tenets in good faith:

- A. I will exhibit the highest standards of fairness, ethical behavior and genuine good sportsmanship in all of my relations with others.
- B. I will not damage public or private property. I understand that I may be held financially responsible for damage deemed to be wantonly or willfully executed on my part, and that I may be subject to disciplinary action by U.S. Figure Skating.
- C. I will not use or possess illegal drugs, and I will not engage in criminal activity. I understand that, if I am found to use or possess illegal drugs, or if I am found to engage in any criminal activity during any activity hosted, supported, sponsored or engaged in by U.S. Figure Skating, I may be subject to criminal penalties as well as penalties imposed by U.S. Figure Skating.
- D. I will adhere to the rules of U.S. Figure Skating and the host organization at all activities hosted, supported, sponsored or engaged in by U.S. Figure Skating.
- E. I will comply with all applicable anti-doping rules including, but not limited to, ISU and USADA anti-doping rules.
- F. I will conduct myself in a manner not detrimental to the welfare of figure skating. I understand that my actions reflect on U.S. Figure Skating and the sport of figure skating both positively and negatively. I understand that if my acts, statements, or conduct are considered detrimental to the welfare of figure skating by the appropriate authority, I may be subject to penalties imposed by U.S. Figure Skating pursuant to GR 1.04.
- G. I understand that the penalties that may be imposed may include, but are not limited to, loss of future international selections, loss of financial support from U.S. Figure Skating and its Memorial Fund, and loss of participation in activities hosted, supported, sponsored or engaged in by U.S. Figure Skating.
- H. I understand that all disciplinary proceedings will be conducted pursuant to Article XXV, Section 3, of the U.S. Figure Skating bylaws, and that my rights and remedies are derived therefrom.

x

Signature of Skater (if age 18 or over) or Parent/Guardian (if under age 18)

VOLUNTEER POLICY

Winchester Figure Skating Club is a volunteer-run not-for-profit organization. As such, it fully relies upon the efforts of its members to pursue its mission. All Full and Introductory members are required to satisfy an annual volunteer requirement (10 hours for Full, or 5 hours for Introductory).

Please select one or more items below to indicate your intended way(s) to fulfill the volunteer requirement:

- Serve as ice monitor (1 hour per ice time)
- Provide hospitality items for WFSC test sessions (1 hour per test session)
- Act as assistant to Test Chair for WFSC test sessions (# hours at test session)
- Organize a fundraising event (5 hours per event)
- Organize a social event for club members (5 hours per event)
- Other idea – please specify: _____
- Opt out of volunteering by submitting a fee with this application of \$200 (for Full members) or \$100 (for Introductory members)
- n/a (skater is not a Full or Introductory member)

By signing below I agree to commit to the volunteer requirement:

x _____

Signature of Parent/Guardian

PAYMENT

Membership Cost (see Membership section for prices)	\$ _____	
If applicable, Volunteer Opt-out fee (see Volunteer section above)	plus \$ _____	
Less Early Bird Discount (subtract \$25 if submitting by 6/21/18)	minus \$ _____	Collegiate & Non-Skating excluded from Early Bird
Total Due with Application	= \$ _____	

Please make checks payable to "Winchester Figure Skating Club". Mail Application & payment to: **WFSC, P.O. Box 1093, Burlington, MA 01803.**

ACKNOWLEDGEMENT

I understand that if I am accepted as a member of the Winchester Figure Skating Club (WFSC), I will abide by the rules and bylaws of the Club and the regulations of USFS. I fully understand that I am responsible for the payment of my contracted ice for the entire skating season and all monies will be promptly paid. I understand there is a three month probationary period to my being accepted fully as a member. I understand there is an ice change during the Burlington High School Hockey season. I understand that 30 days in arrears, testing and competing will not be allowed. I understand that 60 days in arrears equals automatic suspension of ice privileges.

- No person under the age of 6 will be allowed skating privileges unless approved by the Board of Governors or its representatives.
- Ice cancellations due to inclement weather or other will be listed on our website www.winchesterfsc.com and sent by e-mail as early as possible.
- Club announcements are sent by email to club members. Be sure to provide an email address in the area noted above to receive these emails.
- I also understand that there is a volunteer requirement as described above in the volunteer policy section.

I FULLY UNDERSTAND WHAT I HAVE READ AND WILL ABIDE BY ITS CONTENTS.

x _____

Signature of Parent/Guardian

x _____

Signature of Skater

_____ Date

WINCHESTER FIGURE SKATING CLUB

Emergency Medical Contact Form

IN CASE OF EMERGENCY			
Date:			
Skater's Name:		USFS Number:	
Primary Contact	Name:		Email:
	Cell #:	Home #:	Work #:
Secondary Contact	Name:		Email:
	Cell #:	Home #:	Work #:
Please list any allergies of the skater (medications, food, etc.):			
Please list any medical conditions of the skater that emergency personnel should be notified of:			
Please list any current medications of the skater:			
This form must be completed before the skater enters the ice.			

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 Winchester Figure Skating Club and the facility the activities are taking place in and their staff and to members of the Winchester 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:	Skater's Signature (if age 18 or over):	Date:
	x	
Parent 1 Name:	Parent 1 Signature (if skater is under age 18):	Date:
	x	
Parent 2 Name:	Parent 2 Signature (if skater is under age 18):	Date:
	x	
This Consent for Medical Attention shall be binding and effective for the 2018-19 membership year of the Winchester Figure Skating Club.		