GREATER MILWAUKEE FIGURE SKATING CLUB

2024-2025 Membership Application

I hereby apply for membership with the GREATER MILWAUKEE FIGURE SKATING CLUB. Upon the receipt of my application, I agree to abide by the rules and regulations of the club.

Print Skater's Name			Skater's Signature (Parent/Guardian if Skater is under 18 yrs.)	
Indicate typ	oe of Membershi	o you are app	lying for:	
A)			ne Club Membership	
,			\$145.00 (1 st Member)	
			\$125.00 (2 nd Member)	
			\$95.00 (3 rd Member)	
В)	Greater Milwaukee FSC Associate Membership			
			\$60.00 (1 st Member)	
			\$50.00 (2 nd Member)	
			\$40.00 (3 rd Member)	
C)	Greater Milwa	ukee FSC Hon	ne Club Non-Skating Membership	\$75.00
D)			oductory* Membership	\$95.00
	*First Time	Membership	to USFS, other than Basic Skills	
E) Greater Milwaukee FSC <u>Collegiate*</u> Membership				\$160.00
	*Four year Membership, option may be used only once			
	ip. I understand		yrs), I assume and discharge the financellations/refunds are at the approval o	_
		Signature	e of Parent/Guardian or Skater (if over 1	.8yrs)
Name of Ap	pplicant		Name of Parent/Guardian, if Skater is	s under 18yrs
Address of	Applicant		City/State/Zip	
()	-	()	-	
Home Phor	ne Number	Mobile F	Phone Number E-Mail Addre	SS
	/ /			
Birthdate o	f Applicant (mm/	dd/yyyy)	Name and Phone Number of Co	oach
Mail compl	eted form and m	embership du	ues to: Greater Milwaukee FSC, C/O Ral 4764 S. 39 th St.	ph Dahlman,
			Greenfield, WI. 53221	GMFSC (414)282-3948