

Application for Membership

First Name:	Last Name:	Middle:
Permanent Address:		
City:	State:	Zip:
Home Phone:	Work:	Cell:
Email:		Date of Birth:
If applicant is a juvenile (under	18 years of age) give nar	me of parent or other legally responsible
individual (s) who may accompa	any you to skating sessio	ons.
Name:		Phone:
Address:		
Cell	<u></u>	
Relationship:		
Are you currently a member of	US Figure Skating?	Yes, or No
US Figure Skating number _		_
Categories of Membership (Apply	ying For):	
Active Skater General Member Basic Skills USFS Me	mbership	

Fee Structure

Active Skater	<u>\$50</u>		
Memberships with ISI			
(competitions, testing, skating on	freestyle, in skating pro	grams)	
General Membership	\$30		
Membership just into the club	<u></u>		
(parent, board member, coach)			
(1-1-1-1)			
Basic Skills USFS Membership	\$17		
Membership with USFS	<u></u>		
(able to compete in Basic Skills C	competitions – Free Ska	te 6 and below only)	
1	1	• • • • • • • • • • • • • • • • • • • •	
*These fees are subject to change			
Signature:		Date:	
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Signature of Parent or Legal Guar	dian, if applicant is belo	ow 18 years of age.	
		Date:	
All checks need to be written to F	'SC of Louisiana or Fig	gure Skating Club of Louisiana	
Internal Use Only:			
Review Date:/			
Accepted as Member:	Category:	Rejected Reason:	
Comments			
Total Fees Paid \$			