



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 name of parent or other legally responsible individual (s) who may accompany you to skating sessions.

Name: _____ Phone: _____

Address: _____

Cell _____

Relationship: _____

Are you currently a member of US Figure Skating? Yes, or No

US Figure Skating number _____

Are you currently a member of ISI? Yes, or No

ISI number _____

Categories of Membership (Applying For):

___ Active Skater

___ General Member

___ Basic Skills USFS Membership

Fee Structure

Active Skater \$100.00

Memberships with ISI & USFS
(competitions, testing, skating on freestyle, in skating programs)

Coach Membership \$40.00

Active coaches that are teaching private ice or group classes for FSCLA

General Membership \$30

Membership just into the club
(parent, board member)

**These fees are subject to change*

Signature: _____ Date: _____

Signature of Parent or Legal Guardian, if applicant is below 18 years of age.

_____ Date: _____

All checks need to be written to FSC of Louisiana or Figure Skating Club of Louisiana

Internal Use Only:

Review Date: ____/____/____

Accepted as Member: _____ *Category:* _____ *Rejected Reason:* _____

Comments _____

Total Fees Paid \$ _____