



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: _____

Relationship: _____ Cell: _____

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

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

US Figure Skating number:

ISI number: _____

Fee Structure

Categories of Membership (Applying For):

- ☐ Active Skater
- ☐ Coach Membership
- ☐ General Member

Active Skater \$100.00

Memberships with ISI
(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