



Membership Application 2018 – 2019



PLEASE USE A SEPARATE FORM FOR EACH MEMBER.
All fields must be completed and all required signatures must be included before application will be processed.

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New Member Renewing Member Transferring – previous club name: _____

Skater's Name: _____

Parent's Names (if skater is under 18): _____ Parent Signature: _____

Emergency Contact Name: _____ Emergency Contact Phone Number: _____

Address: _____

City, State, Zip: _____

Telephone: _____ - _____ - _____ Cell: _____ - _____ - _____

Parents Email: _____ US Citizen Yes No

The ASC uses email as a primary form of communication.

Date of Birth: ____/____/____ School Attending: _____

USFS #: _____ Skates being used: Figure Skates Hockey Skates

Home Club: ASC Other _____ Professional Coach: _____

Highest Test Passed: Freestyle: _____ MIF: _____ Dance: _____

Please circle the membership choice below:

<p>A First Family Member (\$160) Includes voting club membership (\$100), membership to USFS (\$60).</p>	<p>E Associate Non-Home Club Member (\$95) Includes a non-voting club membership (\$95).</p>
<p>B Each additional Family Member (\$69) Includes club membership (\$45), membership to USFS (\$24).</p>	<p>F Honorary Member (\$60) Includes honorary home club membership (n/c) and membership to USFS (\$60).</p>
<p>C ASC Board/USFS Dues Includes voting membership and USFS membership. (\$80) - First family member <input type="checkbox"/> (n/c) - Additional. family member <input type="checkbox"/></p>	<p>G Professional Member (\$100) Includes a non-voting club member only membership only <input type="checkbox"/> Add USFS Membership dues (\$60) <input type="checkbox"/> Total: _____</p>
<p>D Introductory Member (\$80) Includes a non-voting club membership (\$50) and into membership to USFS (\$30). (<i>first year only</i>)</p>	<p>H Collegiate Packages – (non-voting club membership) 1. 1yr Combined ASC (\$40) & USFS Membership (\$60) = (\$100) <input type="checkbox"/> 2. Collegiate 4 yr. USFS Membership (\$70) w/1 yr club membership (\$40) = (\$110) <input type="checkbox"/> 3. Collegiate 1yr <i>ASC Only</i> (\$40) - USFS 4yrs already purchased <input type="checkbox"/> **ASC Membership must be renewed on annual basis, for home club**</p>

Please note that all members are required to have a full membership to USFS whether it is through ASC or through another club (non-home club member)

- Please submit:**
- ✓ ASC Membership Application
 - ✓ Waiver & Release of Liability
 - ✓ Consent for Medical Attention or Treatment
 - ✓ Photo Release
 - ✓ Volunteer Form
 - ✓ Parents Code of Conduct
 - ✓ Membership dues – make check payable to “ASC” and mail or pay online at <https://www.amherstskatingclub.org/bill-pay>

If paying by check, please make payable to Amherst Skating Club. Mail to LTS ASC, 1615 Amherst Manor Dr. Williamsville NY 14221 or drop form, payment and check into ASC mailbox, bottom floor Northtown Center.

Questions?? Contact us at info@amherstskatingclub.org. Additional forms are available on the membership page at www.amherstskatingclub.org

Date
Amount
Check #/Stripe Conf. #
Balance
Approved

Amherst Skating Club
Waiver and Release of Liability,
Assumption of Risk and Indemnity Agreement (“Agreement”)

In consideration of participating in **Amherst Skating Club** activities, I represent that I understand the nature of figure skating activities (“activity”) and that I am 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 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 **Amherst Skating Club**, United States Figure Skating, it’s 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 **Amherst 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 **Amherst 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.

Printed Name of Participant (Skater)

Date

Signature of Participant (Skater 18 years old and above)

PARENTAL CONSENT AND INDEMNIFICATION AGREEMENT (for skaters up to 17yrs of age)

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.

Printed Name of Parent/Guardian

Date

Signature of Parent/Guardian



Media / Photo Release

Parents are encouraged to email all skating news to info@amherstskatingclub.org.

Please check one:

- I/we give permission to my skater to be in any ice photos that can be used for promotional purposes.
- I/we do not consent to the use of my child's image for the purposes outlined above.

Please print

Skater's Name: _____

(If skater is 17 or under)

Name Parent/Guardian: _____

Signature of Parent/Guardian or Adult Skater: _____

Date: _____

Consent for Medical Attention or Treatment

Check One:

- I/we consent to the **Amherst Skating Club** and the facility the activities are taking place in and their staff and to members of the **Amherst 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.
- I/we do not give consent for medical attention or treatment. In doing so, I/we understand that medical treatment is my responsibility.

Please print

Skater's Name: _____

(If skater is 17 or under)

Name Parent/Guardian: _____

Signature of Parent/Guardian or Adult Skater: _____

Date: _____

This Consent for Medical Attention shall be binding and effective for the entire membership year.



CLUB/PROGRAM 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.

Preamble: The essential elements of character-building and ethics in sports are embodied in the concept of sportsmanship and six core principles: respect, responsibility, fairness, caring, trustworthiness and good citizenship. The highest potential of sports is achieved when competition reflects these "six pillars of character" (Arizona Sports Summit Accord).

By signing below I hereby agree that:

1. I will encourage good sportsmanship by my actions, demonstrating positive support for all skaters, coaches, and officials at every practice, competition and test session.
2. I will place the emotional and physical well-being of my child and others ahead of my desire to win.
3. I will encourage my child to skate in a safe and healthy environment by maintaining a respectful and courteous attitude to others.
4. I will promptly inform my child's coach of any physical/mental disability or challenge affecting my child that may affect the safety of my child or others.
5. I will teach my child that doing his/her best is more important than winning.
6. I will do my best not to ridicule, bully, blame, or yell at my child or other skaters, coaches, officials or volunteers in response to a poor performance or for any other reason.
7. I will do my best to make skating fun at all times and will remember that my child participates in sports for his/her own enjoyment and satisfaction.
8. I will teach my child to treat other skaters, coaches, fans, volunteers, officials, and rink staff with respect, regardless of race, creed, color, sexual orientation or ability. I will also take action and report any acts of bullying, harassment or abuse to the appropriate authorities.
9. I will applaud any effort in both victory and defeat emphasizing positive accomplishments and learning from mistakes.
10. I will teach my child to resolve conflicts calmly and peacefully without resorting to hostility or violence.
11. I will be a positive role model for my child and others.
12. I will demand a figure skating environment for my child that is free of drug or alcohol abuse and agree that I will not use or provide to a third-party any illegal drug prohibited by applicable federal, state, or municipal law.
13. I will not assist or condone any athlete's use of a banned substance as described by the International Olympic Committee, International Skating Union, United States Olympic Committee, or U.S. Figure Skating, or, in case of athletes, to use such drugs or refuse to submit to properly conducted drug tests administered by one of these organizations.
14. I will expect my child's coach to be in compliance with all requirements of U.S. Figure Skating and the Professional Skaters Association, to continue their education and training through programs offered by U.S. Figure Skating, the Professional Skaters Association and other accredited organizations.
15. I will respect my child's coach and refrain from "side line" coaching my child or other skaters.
16. I agree to educate myself regarding the proper procedures to follow when establishing or Terminating the coaching relationship and refrain from third-party solicitation as outlined on the PSA website.

17. I will respect the decisions of officials, their authority and decisions during competitions and test sessions and teach my child to do the same.

18. I will show appreciation and recognize the importance of volunteers and club officials. I will fulfill my responsibility to help my club with membership, special projects, competitions and test sessions.

19. I will become familiar with the rules of the U.S. Figure Skating and teach my child accordingly.

20. I will support and respect all skaters and their right to participate.

Signature_____

Date_____

ASC RULES/POLICY ACKNOWLEDGEMENT

I and my skater have read and agreed to abide by the ASC Rules/Guidelines and the ASC Safesport Policy. I will ensure that I and/or my skater (17yrs and under) understands and complies.

Signature of Parent/Guardian or Adult Skater:_____ Date:_____



Volunteer Sheet

Parent Name: _____ Skater Name: _____

Phone: _____ Email: _____

Section 2.4 of the ASC bylaws state that all club members are required to volunteer a minimum of 15 hours per year.

Here is how you can do your share!

Check off the area you want to participate in:

- Competitions
 - Registration
 - Convening
 - Music/Announcing
 - Hospitality
- Learn To Skate
 - Monitor at Table
 - On-Ice Volunteers
- Test Sessions
 - Registration
 - Convening
 - Music/Announcing
 - Hospitality
- Baking
- Annual Banquet
- Fundraising

- Other:

Signature:
