



May 19, 2010

Dear Shaker Figure Skating Club Member:

On behalf of the Shaker Figure Skating Club, thank you for your membership and participation in Club activities this past year. Your current membership expires June 30, 2010, and, as we head into summer, it's time to renew your membership for 2010-2011.

Enclosed please find the Membership Application, the Release/Emergency Medical Information Form and the Parent Code of Conduct—each of which must be completed and returned with payment to me no later than June 30, 2010. Please note that Club dues are remaining the same as this past year.

Of special note, U.S. Figure Skating is offering an introductory membership for people who are new to U.S. Figure Skating. This discounted rate is available to people who have never been full members of U.S. Figure Skating, either as an individual or with any figure skating club. If you know of any skaters who are considering making the transition from Learn-to-Skate, this introductory rate is for them. Please help us spread the word!

I urge you to renew early to avoid the rush and to ensure that your membership does not lapse. I will be available at the Banquet next Friday, June 11 to collect renewal forms and payment. After July 1, if you do not renew, your skater will not be able to participate in USFS tests, competitions (i.e Mentor Sunshine) or other Club activities.

Please feel free to contact me at [eod@wowway.com](mailto:eod@wowway.com) or 216.295.2020 if you have any questions.

Sincerely,

Emily Davidson  
Membership Administrator  
Shaker Figure Skating Club

# SHAKER FIGURE SKATING CLUB

## MEMBERSHIP APPLICATION

JULY 1, 2010 - JUNE 30, 2011

PLEASE PRINT

CHECK HERE IF ANY CONTACT INFO HAS CHANGED

SKATER'S NAME: \_\_\_\_\_ USFS NUMBER \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE (\_\_\_\_) \_\_\_\_\_ CELL/WORK PHONE (\_\_\_\_) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ US Citizen? Yes No

SKATER'S AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ HOME CLUB \_\_\_\_\_

(required)

HIGHEST TEST PASSED \_\_\_\_\_ MOVES \_\_\_\_\_ FREESTYLE \_\_\_\_\_

COACH \_\_\_\_\_ MOVES \_\_\_\_\_ FREESTYLE \_\_\_\_\_

### MEMBERSHIP FEE: choose one level of membership

Each family member must complete a separate membership application and waiver form

Home Club Member	\$85	_____	
New Member*	\$70*	_____	*special rate for people who have not previously been a member of U.S. Figure Skating with any club or as
2nd Family Member	\$40	_____	
3rd Family Member	\$30	_____	
Associate Member	\$45	_____	
Collegiate Member	\$70	_____	(4-year membership through June 2014)

TOTAL AMOUNT DUE WITH APPLICATION \_\_\_\_\_

Make checks payable to: SHAKER FIGURE SKATING CLUB

DUE DATE: June 30, 2010

**All previous financial obligations with this Club or any other club must be paid before the application can be processed.**

- Mail: 1. Completed and signed Membership Application  
2. Payment  
3. Release and Emergency Information Form

Mail to: Emily Davidson  
Shaker Figure Skating Club  
19428 Lomond Blvd.  
Shaker Hts., OH 44122

I agree to abide by the Shaker Figure Skating Club Constitution and By-Laws governing all Club activities.

(This means that parents and/or guardians are governed by the same rules of conduct and club by-laws as your minor child or children). I recognize my financial liability for the full Fall/Winter Session and hereby agree to pay all balances due for the ice time contracted for and reserved in my name, or in the name(s) of members of my family, or in the name(s) of those for whom I am guardian. I understand that accounts not paid up-to-date will result in a loss of ice privileges, test and/or competition privileges. If I have any questions I may contact the Membership Administrator, Emily Davidson, at 216-295-2020, or e-mail at eod@wowway.com.

Signed

\_\_\_\_\_  
(skater)

\_\_\_\_\_  
(parent or guardian if skater is under 18 years)

Permission is granted to use my child's picture in future advertisement, literature, and for events sponsored and conducted by the SFSC.

\_\_\_\_\_  
(parent or guardian if skater is under 18 years)

\_\_\_\_\_  
Date

**SHAKER FIGURE SKATING CLUB**  
**RELEASE, WAIVER OR LIABILITY AND EXPRESS ASSUMPTION OF RISK AGREEMENT**  
**(MUST BE COMPLETED)**

In consideration of my participation in any Shaker Figure Skating Club program, including Shaker SYNCsations Synchronized Skating Team, I acknowledge an understanding of the nature of the activity and that I, or my minor child, am qualified, in good health and in proper physical condition to participate in such activity. I acknowledge that if conditions are unsafe, I, and/or my minor child, will immediately discontinue participation in the activity.

I fully understand that skating involves risks of serious bodily injury, including permanent disability, paralysis and death, and that these or other risks may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place or the negligence of the Releasees names below. I also acknowledge there may be other risks either not known to me or not foreseen 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 Shaker Figure Skating Club, its officers, Board of Trustees, members, volunteers and agents (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. This release waiver of liability and express assumption of risk agreement does not apply to any liability, claims, demands, losses or damages arising out of the gross negligence of, or intentional, willful or wanton misconduct of Releasees. If I, or anyone on my and/or my minor child's behalf, makes a claim which does not arise from the gross negligence of, or intentional, willful or wanton misconduct of Releasees- against any of the Releasees, I will indemnify, defend, save and hold harmless each of the Releasees from any loss, liability, damage or cost which any may incur as the result of such a claim.

I acknowledge that I have read this release, waiver of liability and express assumption or risk agreement and fully understand its intent.

\_\_\_\_\_  
Signature of Participant (only if over age 18)

\_\_\_\_\_  
Signature of Parent/Legal Guardian - (if participant under 18)

**EMERGENCY MEDICAL INFORMATION**

Skater: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone (     ) \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION**

**IN CASE OF EMERGENCY CONTACT**  
(if Parent/Guardian cannot be contacted)

Name: \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone: Home: \_\_ ( \_\_\_\_ ) \_\_\_\_\_  
Office or Cell: ( \_\_\_\_ ) \_\_\_\_\_

Name: \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone Home: ( \_\_\_\_ ) \_\_\_\_\_  
Office or Cell: ( \_\_\_\_ ) \_\_\_\_\_

**MEDICAL HISTORY**

Allergies: \_\_\_\_\_  
Existing Medical Conditions: \_\_\_\_\_

Medical Facility of Choice: \_\_\_\_\_

	Name	Address	Telephone
Physician	_____	_____	Telephone ( ____ ) _____
Dentist	_____	_____	Telephone ( ____ ) _____
orthopedist	_____	_____	Telephone ( ____ ) _____
Specialist	_____	_____	Telephone ( ____ ) _____

**Shaker Figure Skating Club**  
**Parent Code of Conduct**  
**from July 1, 2010 to June 30, 2011**

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 demonstrating positive support for all skaters, coaches and officials at every practice session, competition and test session.
2. I will place the emotional and physical well being of my child ahead of my personal desire to win.
3. I will encourage my child to skate in a safe and healthy environment.
4. I will inform my child's coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
5. I will teach my child that doing one's best is more important than winning, so that my child will never feel defeated by the results of a competitive event.
6. I will never ridicule or yell at my child or other participant for making a mistake or blame my child's teammates for placement in a competition.
7. I will do my best to make skating fun and will remember that my child participates in sports for his/her own enjoyment and satisfaction not mine.
8. I will ask my child to treat other skaters, coaches, fans, and officials with respect, regardless of race, creed, color, sexual orientation or ability.
9. I will applaud a good effort in both victory and defeat emphasizing the positive accomplishments and learning from the mistakes.
10. I will teach my child to resolve conflicts without resorting to hostility or violence.
11. I will be a positive role model for my child and other skaters.
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 drug proscribed by applicable federal, state, or municipal law.
13. I will not assist or condone any competing athlete's use of a drug banned 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 not provide alcohol to, or condone the use of alcohol by minors, abuse alcohol in the presence of athlete members, or at U.S. Figure Skating activities or, in the case of athletes, consume alcoholic beverages while a minor.
15. I will encourage my child's coach to continue their education and training through programs offered by U.S. Figure Skating, the Professional Skaters Association and other accredited organizations.
16. I will respect my child's coach and refrain from coaching my child or other skaters during competitions and practices because it may conflict with the coach's plan or strategies.
17. I will respect the decisions of officials and their authority during competitions and test sessions and teach my child to do likewise.
18. I will show appreciation and recognize the importance of volunteers and club officials.
19. I will study the rules of the U.S. Figure Skating and teach my child accordingly so that we have an understanding and appreciation of the rules of competition and membership.
20. I will support all the opponents in my child's competition and respect the rights of all skaters to participate.
21. I shall act in a manner which avoids verbal or physical misconduct of any skaters, other coach, parent or official.

Signature\_\_\_\_\_

Date\_\_\_\_\_