



**Membership Application 2009 - 2010**  
**(Page 1)**

**EVERETT FIGURE SKATING CLUB**

Attn: Membership Chair  
P.O. Box 12997  
Everett, WA 98206

<b>Primary Applicant (Please see page titled "Definitions, Requirements and Benefits" to determine your classification.)</b>					
<input type="checkbox"/> Jr. Home Club <input type="checkbox"/> Sr. Home Club <input type="checkbox"/> Sr. Home Club/Non-Skating <input type="checkbox"/> Associate <input type="checkbox"/> Professional <input type="checkbox"/> Collegiate					
<input type="checkbox"/> Introductory <input type="checkbox"/> Introductory Upgrade <input type="checkbox"/> Spring					
Name: _____			Miss / Ms. / Mrs. / Mr.		USFS #:
Address: _____					Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
City: _____		State: _____	Zip Code: _____		Birth Date:    mm / dd / yyyy
Work phone: _____	Home phone: _____		Email (primary form of communication to our members): _____		
Cell Phone: _____			U. S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Emergency Contact Person: _____				Phone #: _____	
<b>Member's Primary Activity:</b> <input type="checkbox"/> Parent/Guardian <input type="checkbox"/> Coach - PSA# _____ Exp. Date _____ <input type="checkbox"/> Competitive Skater <input type="checkbox"/> Recreational Skater <input type="checkbox"/> USFS Official/Officer <input type="checkbox"/> Club Officer/Board Member <input type="checkbox"/> Non-Skater <input type="checkbox"/> Adult Skater					
<b>Please check if you are a synchro skater.</b> <input type="checkbox"/>					
<b>Eligibility Status:</b> <input type="checkbox"/> Eligible <input type="checkbox"/> Ineligible <input type="checkbox"/> Restricted            (See US Figure Skating eligibility rules.)					
<b>Second Applicant (Please see page titled "Definitions, Requirements and Benefits" to determine your classification.)</b>					
<input type="checkbox"/> Jr. Home Club <input type="checkbox"/> Sr. Home Club <input type="checkbox"/> Sr. Home Club/Non-Skating <input type="checkbox"/> Associate <input type="checkbox"/> Professional <input type="checkbox"/> Collegiate					
<input type="checkbox"/> Introductory <input type="checkbox"/> Introductory Upgrade <input type="checkbox"/> Spring					
Name: _____			Miss / Ms. / Mrs. / Mr.		USFS #:
Address: _____					Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
City: _____		State: _____	Zip Code: _____		Birth Date:    mm / dd / yyyy
Work phone: _____	Home phone: _____		Email (primary form of communication to our members): _____		
Cell Phone: _____			U. S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Emergency Contact Person: _____				Phone #: _____	
<b>Member's Primary Activity:</b> <input type="checkbox"/> Parent/Guardian <input type="checkbox"/> Coach - PSA# _____ Exp. Date _____ <input type="checkbox"/> Competitive Skater <input type="checkbox"/> Recreational Skater <input type="checkbox"/> USFS Official/Officer <input type="checkbox"/> Club Officer/Board Member <input type="checkbox"/> Non-Skater <input type="checkbox"/> Adult Skater					
<b>Please check if you are a synchro skater.</b> <input type="checkbox"/>					
<b>Eligibility Status:</b> <input type="checkbox"/> Eligible <input type="checkbox"/> Ineligible <input type="checkbox"/> Restricted            (See US Figure Skating eligibility rules.)					
<b>Third Applicant (Please see page titled "Definitions, Requirements and Benefits" to determine your classification.)</b>					
<input type="checkbox"/> Jr. Home Club <input type="checkbox"/> Sr. Home Club <input type="checkbox"/> Sr. Home Club/Non-Skating <input type="checkbox"/> Associate <input type="checkbox"/> Professional <input type="checkbox"/> Collegiate					
<input type="checkbox"/> Introductory <input type="checkbox"/> Introductory Upgrade <input type="checkbox"/> Spring					
Name: _____			Miss / Ms. / Mrs. / Mr.		USFS #:
Address: _____					Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
City: _____		State: _____	Zip Code: _____		Birth Date:    mm / dd / yyyy
Work phone: _____	Home phone: _____		Email (primary form of communication to our members): _____		
Cell Phone: _____			U. S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Emergency Contact Person: _____				Phone #: _____	
<b>Member's Primary Activity:</b> <input type="checkbox"/> Parent/Guardian <input type="checkbox"/> Coach - PSA# _____ Exp. Date _____ <input type="checkbox"/> Competitive Skater <input type="checkbox"/> Recreational Skater <input type="checkbox"/> USFS Official/Officer <input type="checkbox"/> Club Officer/Board Member <input type="checkbox"/> Non-Skater <input type="checkbox"/> Adult Skater					
<b>Please check if you are a synchro skater.</b> <input type="checkbox"/>					
<b>Eligibility Status:</b> <input type="checkbox"/> Eligible <input type="checkbox"/> Ineligible <input type="checkbox"/> Restricted            (See US Figure Skating eligibility rules.)					
Complete the information on <b>page one, two AND three</b> of the Membership Application, as well as all other agreements included in the application packet, and attach payment for the appropriate membership fee. <b>Applications received by June 23, 2009 may deduct \$5 from each membership cost. Mid-year change of Home Club requires a USFS Notice of Change of Home Club form.</b> (See Membership Chair.) Please make checks payable to <b>Everett Figure Skating Club.</b> Returned checks are subject to a \$25 fee.					
Rec'd by: _____	Date:    /    /	Cash/Ck # _____	Amount \$ _____	USFS Input by: _____	Date:    /    /