



CLINTON FIGURE SKATING CLUB, INC

P.O. Box 322, Clinton, New York 13323

Membership Enrollment Form for Special Olympics, Snowplow Sam and Learn to Skate (Levels 1-6 and Pre-Free)

Skater Name: _____

Today's Date: _____

Skater DOB: _____

USFSA #: _____

Last Level Passed: _____

Gender: _____

Name of Guardian: _____

How did you hear about us? _____

Mailing Address: _____

Home Phone: _____

(Street) _____

Alternative Phone: _____

(City) _____

(Zip) _____

Email: _____

2nd Email (if desired): _____

Please check all of the following options for which you want to register: ****Times are tentative and subject to change****

1. Special Olympics Monday 6:00-6:30

2. Snow Plow Sam (Ages 3-5) (\$250) Please circle which group lesson day desired

A: Monday 6:00-7:00

Extra practice time on Tuesday 6:00-7:00

B: Tuesday 6:00-7:00

Extra practice time on Monday 6:00-7:00

3. Learn to Skate (\$340) Please circle which group lesson day desired

A: Monday 6:00-7:00

Extra practice time on Tuesday 6:00-7:00

B: Tuesday 6:00-7:00

Extra practice time on Monday 6:00-7:00

4. Synchronized Skating (\$260) Times and Days TBA

5. LTS USFSA Fee (\$16.25) OR Paid in July during summer skate

Fee Summary	Amount
SPS/LTS Class	
Discounts \$35 2 nd member or 10% >= 3 members	
Total	
LTS USFSA Fee	
Syncro	
Total	
Other Family Total	
Total	
Amount paid	
Amount due Nov 15	
Ice Show Fee	See #2

1. One half of Enrollment Fee is due before the start of skating. **Remaining half is due November 15th.** Total fee includes USFS membership dues and all applicable CFSC fees. (*Short-term class (8-10 weeks) fees are due in full by the first day of classes.*)

2. All members are subject to an **additional membership fee** for Ice Show. An Ice Show Assessment of \$75.00 per skater (maximum \$100.00 per family) is payable through ticket sales. **This fee is required whether the skater participates in the ice show or not.** The ice show is our biggest fundraiser and participation is vital to our club success. (*Ice show is not required for participants of short-term classes.*)

3. Any payments **NOT** made as specified will jeopardize the member's standing in the club and will result in the **loss of privileges** (e.g., ice time, participation in ice show, permission to test or compete) and result in a \$10.00 late fee per month until full payment is received.

This area is for Club use Only

Forms received by: _____ Fees received by: _____

Permission for Skater's Picture with/without name to appear on "CFSC" website/Facebook page: ___ Yes ___ No

THE PERSON SIGNING BELOW ACKNOWLEDGES RECEIPT OF THE FOLLOWING: (Please initial each)

_____ MEDICAL RELEASE _____ HANDBOOK

As such, skaters, or their responsible designee, will abide by all rules or submit to the appropriate disciplinary action.

Signed: _____

Date: _____