



## COLUMBINE FIGURE SKATING CLUB

### Membership Renewal/Application Form

	Name	Current USFS #	Date of Birth	Sex (M/F)	Membership Type	Fee
1						\$
2						\$
3						\$
4						\$
5						\$
6						\$
	<b>TOTAL FEE DUE</b>					\$

#### Membership Types and Associated Fees\*

(Please enter the appropriate letter in the membership type box above.)

- A. Senior Member (age 18+) ..... \$ 65.00
- B. Junior Skater and Parent or Guardian (required if skating member is under 18) . \$ 90.00
- C. Introductory Member (Basic Skills) – no parental membership required ..... \$ 35.00
- D. Additional Skating Member ..... \$ 35.00
- E. Additional Non-Skating Family Member(s) ..... \$ 15.00
- F. Associate Skating Member ..... \$ 30.00  
 (Home Club Name: \_\_\_\_\_)
- G. Coach/Judge/Honorary..... No Fee  
 (PSA Number: \_\_\_\_\_ Expiration: \_\_\_\_\_)

Home Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_  Check if any information is new!

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Other (Specify): \_\_\_\_\_

E-Mail Addresses: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

For Office Use Only	
check #:	amt:

**RELEASE**

(Please read carefully before signing)

At all times, on and off the ice, all members are to maintain high standards of behavior while representing the Columbine Figure Skating Club. The undersigned agrees to hold harmless the USFS, the Columbine Figure Skating Club, the Apex Ice Arena, and all of their employees or agents from any and all loss, damage, and/or injury that may be sustained by the member in any manner while participating in any of the activities of the Columbine Figure Skating Club and/or Apex Ice Arena.

\_\_\_\_\_  
Signature (Parent or guardian of any member under 18 years old)

\_\_\_\_\_  
Date

Please make checks payable to: Columbine Figure Skating Club. Checks may be placed in the Completed Membership Folder in CFSC's box (under the Ice Arena counter) or mailed to the Membership Chair at:

Columbine Figure Skating Club  
Attn: Membership Chair  
P.O. Box 158  
Arvada, CO 80001

For ease of communications, the Club is assembling a Membership Directory. Please initial in the blank below your permission to include your name(s), address, telephone number, and e-mail address in the Directory:

\_\_\_\_\_ Yes, I give my permission for my information to be included in the Membership Directory  
(If you list more than one telephone number or e-mail address, please identify which one(s)  
you would like included in the Directory.)

\_\_\_\_\_ No, I do not give my permission for my information to be included in the Directory.