

The Pawtucket & Providence Figure Skating Club 2019-20 Membership Information

Current memberships expire on June 30. We are beginning the processing renewals and new applications for club and USFS memberships for 2019-20. The membership categories and fee schedule follow.

- First member of a family having a membership
- Subsequent membership- for an additional member from the same family
- **Introductory membership** available for a one-time reduced fee, can only be used by new members during their first year of a FULL membership (not Learn to Skate)
- Collegiate membership- four years of membership in USFS & PPFSC
 - o skater must be in college (any year), or entering this fall, either graduate or undergraduate
 - o membership good for 4 years
 - o may be used only once
 - o additional family members pay the Subsequent member fee

Membership Category	Fee
First family member	\$95
Subsequent member	\$45
Introductory	\$50
Collegiate	\$130

We remind all Club members that a current membership is necessary in order for any skater to be able to skate on a Club ice session, test and / or compete. <u>Please note that your membership will not be processed until it is received by the Membership Chair.</u>

Please complete a membership form for each family. Make checks payable to PPFSC. Mail your completed forms and appropriate fees to:

Janice Delano, Membership Chair 45 Tracy Beth Drive North Attleboro, MA 02760-4334

If you have any questions, please contact Janice at jan102500@comcast.net or at 508 761-5796.

Gloria Haddad PPFSC President



The Pawtucket & Providence Figure Skating Club

Pawtucket & Providence Figure Skating Club 2019-20 Membership Renewal / New Member Application

We require that the parent/guardian of any minor indicate the name of the person who is financially responsible for this minor. This individual will act as the minor's representative for the purpose of voting at PPFSC meetings. Parents and other non-skaters are still welcome to join the club.

Skaters who have memberships with another club and need to join as Associate Members (example: for Theatre on Ice) should **not** use this form. Please use the form for Associate Membership, available on our website.

Please check the category that applies to you / your family.
I am a current member of PPFSC and wish to renew my / our membership(s).
For new members:
New member applications require the approval of the PPFSC Board
I am applying as a new member and do not have a membership with another club.
I currently have a membership with another club and am applying for full membership with PPFSC. Name of current club
The following is a requirement of US Figure Skating.
Please read the Waiver and Release of Liability, Assumption of Risk and Indemnity ("Agreement") and the SafeSport Statement for Membership Renewal, included at the end of this application. Please check and sign both statements below. We cannot process memberships without this acceptance and agreement. You do not need to send in the signed agreement other than what is included below.
I/We have read and accept the terms of the "Agreement" for all of the members listed o this application.
I/We have read and understand the SafeSport Statement for Membership Renewal for all of the members listed on this application. I/We agree to abide by all codes of conduct.
Signature(s) of adult member(s) / parent or guardian of minors
Date signed:
Application continued on next page

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Please print clearly.

Member name		USFS#
Date of birth (nev	v members only)	
Circle membersl	hip type (Please refer to page 1	for fees and details):
Introductory	First family member-	Collegiate (4 years
*For submissi	ons postmarked by June 2	25, 2019.
Please che	ck if any of the following inform	nation has changed in the last year.
Address		
City, State, Zip _		
Telephone Ho	ome	Cell
Email		
If a student, grade	e/year in school as of September	2019:
Is the skater a U.S	S. citizen? yes	_ no
Is this member un	nder 18 years old? yes	no
will also be respo meetings.		is financially responsible for this member. This individua tative for this member for purposes of voting at PPFSC
		fferent than that of the minor member.
Address		
City, State, Zip _		
Signature		
Indicate amount e	enclosed for membership on this	s page:
If you need to inc	lude additional family members	s, please use the following page.
Membership fees	for additional family members:	(from page 4)
TOTAL MEMB	ERSHIP FEES FOR 2019-20:	

Additional Family Members

Names of additional family members living at the same address and having the same parent/guardian who is financially responsible (if applicable).

(Please refer to page 1 for fees and details)		
Name:	USFS#	Fee
Date of Birth:		
U.S. citizen? yes no under 18: ye	es no	
If a student, school name, grade/year in school as of Sep	otember 2019: _	
	Mana !!	
Name:	USFS#	Fee
Date of Birth:		
U.S. citizen? yes no under 18: ye	es no	
If a student, grade/year in school as of September 2019:		
N.I.	Hara"	F
Name:	USFS#	Fee
Date of Birth:		
U.S. citizen? yes no under 18: ye	es no	
If a student, grade/year in school as of September 2019:		
Name:	USFS#	Fee
Date of Birth:		
U.S. citizen? yes no under 18: ye	es no	
If a student, grade/year in school as of September 2019:		
*For submissions postmarked by June 25, 20	19	
Total fees for additional family members:		(nlease list on nage 3)