

# Coyotes Skating Club of Arizona

## 2009-2010 APPLICATION FOR MEMBERSHIP

The Club's membership year extends from July 1 to June 30 of the following year. Membership is active upon receipt of cash payment or clearing of check. There is **no** pro-rating of fees for those who join/renew membership after July 1. Please mail form and payment to:

Mrs. Kim Agster  
Coyotes Skating Club of Arizona  
P.O. Box 28693  
Scottsdale, AZ 85255  
(480) 538-8311                      kimagster@hotmail.com

**MEMBER CERTIFICATION**

In consideration of my participation in any U.S. Figure Skating program or Basic Skills activity, I acknowledge that I understand the nature of the activity and that I, and/or my minor child, am/is 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 and 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 named below, and that 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 U.S. Figure Skating, its Member Clubs, their respective administrators, directors, agents, officers, volunteers, employees, and any sponsors and advertisers of any USFSA-sanctioned event in which I participate (each considered one of the Releasees herein) from all 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, 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 claim.

I acknowledge that I have read this release, waiver of liability and express assumption of risk agreement and fully understand it. I also acknowledge that I will abide by the By-Laws and Rules and Regulations of the Coyotes Skating Club of Arizona and those of the USFSA.

|                             | 1 <sup>st</sup> family member | 2 <sup>nd</sup> family member | 3 <sup>rd</sup> family member | 4 <sup>th</sup> family member |
|-----------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| Name                        |                               |                               |                               |                               |
| USFSA No.                   |                               |                               |                               |                               |
| New or renewing (N/R)       |                               |                               |                               |                               |
| Gender (M/F)                |                               |                               |                               |                               |
| Birthdate                   |                               |                               |                               |                               |
| US citizen (Y/N)            |                               |                               |                               |                               |
| Parent/guardian (if <18)    |                               |                               |                               |                               |
| E-mail                      |                               |                               |                               |                               |
| List home club if not CSCA  |                               |                               |                               |                               |
| Primary rink                |                               |                               |                               |                               |
| Primary coach               |                               |                               |                               |                               |
| Home phone                  |                               |                               |                               |                               |
| Cell phone                  |                               |                               |                               |                               |
| Work phone                  |                               |                               |                               |                               |
| <b>Signature (REQUIRED)</b> |                               |                               |                               |                               |
| Home address                |                               |                               |                               |                               |

**MEMBERSHIP FEES**

- |   |       |  |       |
|---|-------|--|-------|
| <input type="checkbox"/> Single Membership or 1 <sup>st</sup> in Family | \$100 | <input type="checkbox"/> Collegiate Member (4 years) | \$150 |
| <input type="checkbox"/> Second Membership in Family                    | \$ 50 | <input type="checkbox"/> Professional Member         | \$ 60 |
| <input type="checkbox"/> Third or higher Membership in Family           | \$ 25 | <input type="checkbox"/> Associate Member            | \$ 40 |

*All members under 18 years of age must join with a parent. (Example fee: Skater under 18 years old and 1 parent - \$150, 2 Skaters under 18 years old and 2 parents - \$200)*

**TOTAL CHECK AMOUNT:** \_\_\_\_\_

**Please make checks payable to Coyotes Skating Club of Arizona. All returned checks will be subject to a \$30 penalty fee.**

***SIGNATURES ARE REQUIRED FOR EACH MEMBER 18 YEARS AND OLDER. APPLICATIONS WILL NOT BE PROCESSED WITHOUT APPROPRATE SIGNATURES.***

Please complete additional forms for memberships of 5 or more.