

LILAC CITY FSC - MEMBERSHIP FORM

All information is required in order to obtain LCFSC and USFS membership. Please check the appropriate box for the membership you are enrolling for. An *Associate member* is a current USFS member who belongs and represents another club. Associate members have club privileges except voting. *First family member* is the skater and *Subsequent family members* are defined as parents or dependent children up to age 21 living at home or attending school. Emergency information is required if a need arises that your skater may need care. All information is not available to the general membership without your consent.

<input type="checkbox"/> New Member	<input type="checkbox"/> Renewal Member	<input type="checkbox"/> Associate Member
--	--	--

Membership Year: (example: July 1, 2007– June 30, 2008) _____

Parent (or responsible party): _____		Home Phone: _____	
Mother's (name) Wk/Cell Phone: _____		Father's (name) Wk/Cell Phone: _____	
Mailing address: _____		City: _____	State: _____ Zip: _____
E-mail: _____		Emergency Contact: _____	
Emergency Phone: _____		Physician name and phone: _____	
Hospital of choice: _____		Drug allergies or medical conditions: _____	
I give permission for my skater(s) to receive emergency medical care by qualified medical personnel, should it become necessary			
Parent/Guardian Signature _____		Date: _____	
Yes ___ No ___ You may allow our name, address and phone for use in membership contact purposes. Coach of Skaters): _____			

MEMBERSHIP TYPE	DATE OF BIRTH	USFS NUMBER	MALE	FEMALE	New or Renewal	Member Fee
FIRST FAMILY MEMBER						\$
SUBSEQUENT FAMILY MEMBER						\$
SUBSEQUENT FAMILY MEMBER						\$
SUBSEQUENT FAMILY MEMBER						\$

NEW MEMBER	RENEWAL MEMBER	ASSOCIATE MEMBER	Total
1ST Time LCFSC** & USFS **		Home Club:	\$
First Family Member \$35	First Family Member \$95	\$75 Must provide USFS # and	Make checks payable To LCFSC
Subsequent Member \$15	Subsequent Member \$30	be in good standing at home club	

** If from Learn to Skate or Skater's Edge classes. Otherwise first time membership is \$95.00

MEMBERSHIP REQUIREMENTS:

- All members must sign and follow the LCFSC Code of Conduct and return with enrollment form
- The success of the Lilac City FSC depends upon its' members. Volunteering is strongly needed and encouraged.
- All members and parents/guardians must sign the membership form

Skater Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Return to:
Diana West, Membership Chair
7423 N. Hamilton Spokane, WA 99208
or
Place in envelope and put in LCFSC
mail slot on LCFSC office door rink 2.