

# Cape Ann Skating Club

[www.cafsc.org](http://www.cafsc.org)

PO BOX 1193 Gloucester MA 01930

Email: [CapeAnnSkatingClub@yahoo.com](mailto:CapeAnnSkatingClub@yahoo.com)



## Membership Application

September 12, 2017 - May 29, 2018

Included In this Packet:

- Benefits of Membership/General Info
- Make Up Slip Information
- Volunteer Policy
- Membership Application Form
- Code of Conduct (2)
- Media Release Form
- Health Insurance Info & Emergency Contact Form
- Ice Contract
- Waiver / Hold Harmless
- Signature Page\*

Please read all the information and make sure all forms are complete before submitting. Cape Ann Skating Club operates under the ISI (Ice Skating Institute) umbrella. For more info on ISI, please check their website [www.skateisi.com](http://www.skateisi.com).

Annual memberships with ISI from **Sept 1, 2017 to Aug 31, 2018**. Once your application is approved for membership, Cape Ann Skating Club members are automatically registered with ISI.

\*APPLICATIONS WILL ONLY BE ACCEPTED WITH A FULLY COMPLETED SIGNATURE PAGE.

## Cape Ann Skating Club

### General Membership info for FULL MEMBERS & DUAL MEMBERS:

**Ice Contracts** - This form must be filled out to select the freestyle session and group lesson times your skater will attend. This is used to calculate your monthly invoice. It can be changed throughout the year if you need to make adjustments. Contracts can be adjusted throughout the year but you cannot drop sessions after 2/28/18. Please fill out a **drop add form** to make any changes to your annual contract. This form must be submitted to the treasurer or left in the Talbot Rink office lock-box.

**Email & Newsletters** - will be sent to all Club Members on a regular basis to ensure timely communication of all Club information. Please make sure we have your current email address to communicate with you. Email the club with questions anytime; [CapeAnnSkatingClub@yahoo.com](mailto:CapeAnnSkatingClub@yahoo.com)

**Billing** - Invoices are emailed to Members one per month. September to April. Payments are due on the date indicated on your invoice. Payments may be mailed into our PO Box or dropped off at the Talbot Rink in the lock box located in the office. Members can elect to pay for the full season at once, or choose 2 bi-annual payments (Due Sept and Jan). Skaters will have club membership privileges suspended if payment of invoices are overdue.

### **Make Up Slips / Make Up Session Policy** - \*\*\*\*\*NEW POLICY\*\*\*

Make Up Slips allow skaters to attend any other Cape Ann Freestyle Session during the season, without paying the walk-on fee. Make Up Slips do expire at the end of the season and there are no carry-overs. Only Full Club Members and Dual Club Members are eligible to obtain Make Up Slips.

At the beginning of your Membership, your skater will be automatically recorded as 'eligible' for 5 Make Up sessions, and given five (5) hard-copy paper Make Up Slips.

**Note: 5 slips per session are given if contract and membership packet are received by due date. Late submissions and mid season sign ups will result in a prorated number of slips by date received. Skaters joining mid-season will be issued 1 Make Up Slip for every 2 months remaining in the season.**

**THESE SLIPS ARE YOUR DOCUMENTS TO KEEP TRACK OF.** While the Club will have your individual slip numbers recorded in correspondence to your Skater's ISI ID, we will only allow skaters to skate make-up sessions when they present the hard-copy slip to the proctor. They can be used to make up any missed FREESTYLE or GROUP/ POWER CLASS SESSION (assuming the previously skater is contracted for Group/Power Classes).

If your skater does not miss any session throughout the season, the slips still MAY BE USED at any time if you chose to skate extra sessions.



## MAKE-UP SLIP / MAKE-UP POLICY

### INFORMATION

At the beginning of your Membership, your skater will be automatically recorded to receive five (5) Make Up Slips PER EVERY SESSION (hour) you contract. *Ex. If you choose to Contract Sundays at 8 AM and Tuesdays at 6 PM, you will get 10 Make Up Slips in the beginning of the year.*

These will be your documents to keep. Each Member is responsible to keep track of their own Make Up Slips until they are used.

These slips will be numbered and logged with the Club. The #s on the hard copy Make Up Slips coincide with your Skater's Membership and cannot be traded/sold/given away.

Should you miss a session, you may elect to skate any other session by handing in your Make Up Slip to the ice proctor on duty.

Attendance is recorded in the Proctor Book so the Club will verify that session(s) were missed and the make up slip is appropriate to use.

They can be used to make up any missed session. If the Make Up slip value does not equal the contract session rate, payment for the difference must be made at the time of the walk on. *(Ex. This would happen if a skater contracted for regular Freestyle session is using that Make Up slip to join a Power Class.)*

No refunds will be made if the Make Up slip exceeds the sessions value.

If a member drops a session and does not replace it with another, some Make Up Slips may become invalid. Unused Make Up Slips for a drop session should be returned to the Club office.

For Skaters who join mid-year, there is a proration of Make Up slips. The mid-year member will receive 1 Make Up Slip (PER SESSION CONTRACTED) for every 2 months remaining in the season.

## **Volunteering - \*\*\*\* NEW POLICY \*\*\*\* PLEASE REVIEW \*\*\*\***

### Volunteer Fees

A volunteer fee of \$150 for full members, \$90 for dual members is assessed & collected at time of Application submission. This fee is held by the Club during the season, and credited back to the Member at the end of the season once the Member has completed their required volunteer times.

To **OPT OUT** for all volunteering:

A fee of \$200.00 can be paid upfront for individuals wishing to opt out of volunteering all together.

### **VOLUNTEER REQUIREMENTS:**

**Each Full Member family must volunteer 10 hours through out the season (Sept - Aug).**

**Each Dual Member family must volunteer 6 hours at CAFSC and 4 hours at SSSC through out the season.**

THERE ARE 3 CATEGORIES WITH VOLUNTEER REQUIREMENTS:

1. Learn to Skate (LTS)   2. Spring Show   3. General

### NEW REQUIREMENTS

#### **LEARN TO SKATE - Mandatory**

Full Member must spend 2 hours (of the full 10) volunteering with CAFSC Learn To Skate efforts.

Dual Member must spend 1 hour (of the 6) volunteering with CAFSC Learn To Skate efforts.

----- WAYS TO COMPLETE THIS REQUIREMENT ARE LISTED FURTHER DOWN IN THIS DOCUMENT.

#### **SPRING SHOW - Mandatory**

- Full Member must spend 2 hours volunteering to help with Spring Show.

- Dual Member must spend 1 hour volunteering to help with Spring Show.

- **FOR SOLOISTS ONLY:** Any Soloist or their legal guardian must volunteer 1 hr (which will count towards the 2 hr volunteer requirement) to set up for the spring show. Failure to sign up or attend the set up which is the Friday afternoon/evening prior to show will eliminate the skater from the show line up the following day.

*NOTE: If your skater is not in the Spring Show (which will be determined in January when Show Applications are due), you will not be responsible for this requirement and the remaining of your volunteer requirements will fall under "General Volunteer" requirements.*

----- WAYS TO COMPLETE THIS REQUIREMENT ARE LISTED FURTHER DOWN IN THIS DOCUMENT.

#### **GENERAL**

Full & Dual Members spend remaining hours of volunteer requirement performing tasks in the "General" category.

----- WAYS TO COMPLETE THIS REQUIREMENT ARE LISTED FURTHER DOWN IN THIS DOCUMENT.

## WAYS TO VOLUNTEER

Complete your volunteer requirements with the following options, or present a new option to the Club BOD for approval.

Volunteer options that meet the LTS Requirement

- ***Distribute LTS flyers, hang flyers/posters in your town, school, community***
- ***Work CAFSC Table at local events (ie Fall Foliage Festival, Essex Clam Fest, Rockport HarvestFest, Craft Fairs, etc.)***
- ***Walk with CAFSC in Gloucester Holiday Parade or 4th of July Parade***
- ***Help decorate CAFSC parade truck***
- ***Check in LTS kids during LTS Classes - write name tags, track attendance.***
- ***Work CAFSC info table during Talbot Rink Public Skate, hand out materials***
- ***Make photocopies of materials***
- ***Have Senior Skater help during LTS Classes & practice time (must be approved by LTS Director/Coaches)***

Volunteer options that meet the SPRING SHOW Requirement

- ***Volunteer Coordinator***
- ***Hospitality / Bake Sale during show***
- ***Show Promotion via social media, local papers, hanging posters***
- ***Costume Coordinator***
- ***Group Class Show Coordinators -- One or 2 parents per each Group Class - help organize costumes, props.***
- ***Rehearsal Dinner food table***
- ***Paint sets***
- ***Show set up & Show clean up -- includes decorating lobby and ice area***
- ***Video Tape / Photography***
- ***Sell Tickets***
- ***50/50 Raffle***
- ***Coordinate flower table***
- ***Produce Show Invitations, Show Book and Show Program***

Volunteer options to meet GENERAL Volunteer requirement

- ***Organize a Fundraiser***
- ***Bake Sale during Winter Show***
- ***Bay State Games, Viking or Other Group Competition Coordinator***
- ***Proctoring***
- ***Volunteer Coordinator***
- ***Create flyers, graphics, ads***
- ***Publicity - on line social media***
- ***Publicity - local papers***
- ***Swag / Club Jackets & Sportswear***
- ***Website updates***

Cape Ann Skating Club  
PO BOX 1193 Gloucester MA 01930

Membership Application  
(check one)

☐ New Member      ☐ Renewing Member      ☐ Dual Member (with Silver Streaks)

Skater Name \_\_\_\_\_ DOB \_\_\_\_\_

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

ISI # \_\_\_\_\_ Highest ISI Test Passed \_\_\_\_\_

USFS # \_\_\_\_\_ Highest USFS Test Passed \_\_\_\_\_

Highest Moves Passed \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Parent /Guardian Name \_\_\_\_\_

Private Coach(es) Name \_\_\_\_\_

☐

**Full Membership:** One year Membership Fee of \$125.00 is due up front. Additional skaters in the same family can be added as Members for \$75 each. Volunteer Fee of \$150 (per family) is also due with this application. The Volunteer Fee is refunded when the 10 hour volunteer requirements are met.  
NOTE: This Fee is waived for for BRIDGE Members - first year ONLY.

☐

**Dual Membership with Silver Streaks Skating Club:** One year Membership Fee of \$115 is due up front. Volunteer Fee of \$90 (per family) is also due with this application.  
The Volunteer Fee is refunded when the 6 hour volunteer requirements are met at CAFSC.  
NOTE: This Fee is waived for for BRIDGE NEW Members - first year ONLY.

Checks are payable to: Cape Ann Skating Club. Applications & Checks can be mailed into our PO Box or brought to the Talbot Rink and placed in the lock box located on the wall in the Cape Ann Skating Club office.

Amount Due with Application \$ \_\_\_\_\_

## CAPE ANN SKATING CLUB /CAFSC: Skater Code of Conduct

Our goal is to maintain a safe and positive environment for all members.

By signing below, I agree that:

1. I will conduct myself in a manner that is respectful of all CAFSC policies, as well as any other facility while representing CAFSC, at all times.
2. I will help to continue the pride of CAFSC at our home arena, and also at other events, by showing good sportsmanship to other skaters, coaches, officials, parents, rink staff and the general public.
3. I will use appropriate language and behavior at all times.
4. I will support and encourage my fellow skaters at practice sessions, competitions, test sessions, shows, etc.
5. I will be polite and respectful to my coach, as well as the other coaches.
6. I understand that use of the figure skating warm room & rink locker rooms is a privilege and I will use appropriate behavior in the rooms, will help to keep them clean, and will respect other's belongings that are left in the rooms.
7. I will be considerate of other's feelings and will not engage in any bullying behaviors towards others. I understand that this includes teasing, threats, name calling, menacing harassment or any behaviors that disrupt another student's ability to learn.
8. If I feel unsafe or that my rights are being violated, I will notify my coach or a CAFSC board member immediately. I will also help to protect another skater's rights and notify an adult if I am aware of a problem.
9. I understand that I have the right to be happy, to have fun, and to excel at this sport. I have the right to feel safe and respected, and that other skaters will follow this code of conduct as well. I have the right to learn at my own pace and to have my coach be respectful of me.

### **The following procedure will be implemented if a member's behavior does not reflect the code of conduct :**

1st offense: A meeting will be set up between the parent, coach and skater. Written notification of the incident will be turned in by the coach to the board.

2nd offense: A meeting will be set up between the parent, coach, skater and CAFSC board. Written notification of the incident will be kept on file.

3rd offense: The CAFSC board will meet to determine your membership privileges.

Skater Name (PRINT) \_\_\_\_\_

Signed \_\_\_\_\_

ISI # / USFS # \_\_\_\_\_

Date \_\_\_\_\_



## CAPE ANN SKATING CLUB/CAFSC: Parent/Guardian Code of Conduct

A Code of Conduct gives everyone a guide to what is expected of us if we are part of a organization, participating in a sport, or as spectators at our child's events.

The essential elements of character building and ethics in sports are embodied in the concept of sportsmanship - This includes respect, responsibility, fairness, caring, trustworthiness and good citizenship. The highest potential of sports is achieved when competition reflects these ideals.

By signing below, I agree that:

1. I will encourage good sportsmanship by demonstrating positive support for all skaters, coaches and officials at every practice session, competition and test session.
2. I will place the emotional and physical well-being of my child ahead of my personal desire to win.
3. I will encourage my child to skate in a safe and healthy environment.
4. I will inform my child's coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
5. I will do my best to make skating fun and will remember that my child participates in sports for his/her own enjoyment and satisfaction not mine.
6. I will ask my child to treat other skaters, coaches, parents, fans, and officials with respect, regardless of race, creed, color, sexual orientation, gender identity, or ability.
7. I will be a positive role model for my child and other skaters.
8. I will respect my child's coach and refrain from coaching my child or other skaters during competitions, and practices.
9. I will respect the decisions of officials during competitions and test sessions.
10. I will be supportive of all the opponents in my child's competitions and respect the rights of all skater to participate.

Parent/ Guardian Name (PRINT) \_\_\_\_\_

Signed \_\_\_\_\_

Date: \_\_\_\_\_



**Cape Ann Skating Club Media Release**

- € I give permission to the Cape Ann Skating Club (CAFSC) to use my/ my child's name, story, photograph, likeness, and/or quoted comments for the purpose of increasing awareness about the CAFSC and its activities. I further understand that articles and photos may appear on the CAFSC's display board at the club rinks, CAFSC website, and/or local papers.
- € I do not give my permission to use my/my child's name, story, photograph, likeness, and or quoted comments for the purpose of increasing awareness about the Cape Ann Skating Club (CAFSC) and its activities.

PARTICIPANTS NAME \_\_\_\_\_

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**Signature of Skater**

**Date Signed**

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**Signature of Parent/Legal Guardian**

*(If participant is younger than 18 years old at time of registration)*

**Date Signed**

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**Cape Ann Skating Club Emergency Medical Contact Form**

Skater Name \_\_\_\_\_

Insurance Carrier \_\_\_\_\_

Subscriber \_\_\_\_\_ Policy # \_\_\_\_\_

ALLERGIES: \_\_\_\_\_

List any physical limitations and/or special instructions to inform coaches:

\_\_\_\_\_

\_\_\_\_\_

**EMERGENCY CONTACTS - Please list two (2):**

Name: \_\_\_\_\_ Relationship to skater: \_\_\_\_\_

BEST PHONE # for immediate contact \_\_\_\_\_

Additional Phone #s \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to skater: \_\_\_\_\_

BEST PHONE # for immediate contact \_\_\_\_\_

Additional Phone #s \_\_\_\_\_

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ICE CONTRACT - CAFSC MEMBERS  
September 12, 2017 – May 29, 2018

\_\_\_\_ New Member      \_\_\_\_ Renewing Member

Skater ISI # \_\_\_\_\_

Skater Name \_\_\_\_\_ Phone # \_\_\_\_\_

Private Coach Name \_\_\_\_\_

*Please review your choices with your private coach before submitting.*

Select	DAY / SESSION	TIME	MEMBER RATE
	SUNDAY - Freestyle. Open to All Members. Lessons & Practice.	8:00 a - 8:55 a	\$16.00
	SUNDAY - Freestyle. Open to All Members. Lessons & Practice.	8:55 a - 9:50 a	\$16.00
	TUES - 20 min Freestyle, followed by 30 min POWER GROUP Class	6:00 p - 6:50 p	\$23.00
	TUES - 20 min Freestyle, followed by 30 min Basic/Teen Class	6:00 p - 6:50 p	\$20.00
	TUES - 30 min POWER GROUP Class, followed by 20 min Freestyle	6:20 p - 7:10 p	\$23.00
	TUES - 30 min Basic/Teen Class, followed by 20 min Freestyle	6:20 p - 7:10 p	\$20.00
	TUES COMBO Power or Basic/Teen Group Class & 60 min Freestyle	6:00 p - 7:50 p	\$34.00
	TUES: Freestyle. Open to All Members. Lessons & Practice	6:50 - 7:50	\$16.00
	SATURDAY - Freestyle. Open to All Members. Lessons & Practice.	10 a - 11 a	\$16.00
	SATURDAY - Freestyle. Open to All Members. Lessons & Practice.	11 a - 12 a	\$16.00
	SATURDAY - 30 Min GROUP (Alpha - Freestyle), 20 min Freestyle.	12 noon - 12:50 p	\$20.00
	SATURDAY COMBO - 30 Min GROUP & 50 minutes Freestyle	11:30 a - 12:50 p	\$34.00
	WEEKLY TOTAL		\$ _____

- This is a binding contract.
- Contracting party is responsible for the total annual ice fee.
- Payments are to be made from September to April, payable on the 15<sup>th</sup> of the month.
- Your monthly payment amount will be provided to you once you have selected your ice sessions, this amount will be your annual ice bill divided into 8 equal payments.
- Payment vouchers will be available in the club office and on our website.
- Checks should be made payable to CAFSC and can be put in the lockbox in the club office or mailed to the above address.

I \_\_\_\_\_ (name) AGREE THAT THIS IS A BINDING  
CONTRACT FOR ICE AND I AM RESPONSIBLE FOR THE TOTAL ANNUAL ICE CONTRACT FEE.  
TODAY'S DATE: \_\_\_\_\_

## Cape Ann Figure Skating Club

## Waiver/Release/Assumption of Risk - NO EXPIRATION DATE

The undersigned Participant or Parent/Guardian of the identified minor acknowledge and fully understand that Participant will be engaging in activities at the Talbot Ice Rink, Johnson Rink and/or other CAFSC property, and using equipment, harness, props, that may involve risk of serious injury, including permanent, temporary, total or partial disability, death, paralysis, illness or other harm, and that Participant voluntarily engages in such activities with adequate prior knowledge of such risks and dangers.

Such activities may involve ice skating, figure skating and ice sports. Participant or Parent/Guardian acknowledges that participation in ice sports, whether competitive, recreational, or instructional, including use of equipment for such purposes, is a potentially dangerous activity and that inherent in any ice sports is the risk of injury, including through over-exertion or exercise beyond my capability (or that of my child) or from other cause.

If Participant is engaged in a skating program (or other instructional activity) conducted by CAFSC, instructors are available to familiarize Participant with the CAFSC facilities and equipment used for such program and to assist participant in phases of the program.

Participant's assumption and acceptance of risks stated in this document include, but are not limited to, the following general areas:

1. Participation in any and all classes or individual instruction at CAFSC.
2. Participation in unsupervised activities at CAFSC and any other individual activities.
3. The use of any equipment.
4. Accidents occurring within auxiliary areas.

Participant acknowledges the existence of, and agrees to abide by, applicable rules, regulations, policies, and procedures of CAFSC (rules relating to use of the Talbot Rink, Johnson Rink, and other CAFSC facilities may be posted for your information and convenience, but the lack of posting shall not relieve Participant of this obligation).

Participant or Parent/Guardian agree to and do assume all legal and financial responsibility for (i) any and all risks and dangers associated with such activities, (ii) any and all injuries, damages and losses, whether to person or property, and whether physical, psychological, social or economic, that Participant may in any manner and from whatever cause or sustain in connection with such participation, including such injury or damage that may result not only from his/her own actions, inactions or negligence, but action, inaction or negligence of CAFSC or others, or the condition of the premises or of any equipment used and further, that there may be other unknown risks not reasonably foreseeable at this time, and (iii) all treatment, hospitalization and other care rendered to Participant in the event of his/her illness, injury or other emergent circumstance in connection with any such participation. Participant or Parent/Guardian assume all the foregoing risks and accept personal responsibility for the damages following such injury, including permanent, temporary, total or partial disability, death, injury, illness or other harm.

Participant or Parent/Guardian hereby fully and forever release, discharge, hold harmless and agree to indemnify and not to sue CAFSC, its employees, directors, officers, volunteers, affiliates, representatives, agents, insurers and their respective successors and assigns, from and against any and all liabilities, losses, claims, demands, litigation, damages and judgments, present or future, known or unknown, valid or invalid, direct or consequential (whether physical, psychological, social, economic or otherwise), together with reasonable costs and attorneys fees which (i) result directly or indirectly from injuries, illness, disability (whether permanent, temporary, total or partial), death or other harm to Participant or Participant's and/or Parent's/Guardian's property, or the property of third parties, and (ii) are caused by or result, directly or indirectly, from Participant's conduct, acts or omissions while participating in any activities on or about CAFSC property.

PARTICIPANT FURTHER UNDERSTANDS THAT THIS DOCUMENT MAY NOT BE ALTERED IN ANY MANNER WITHOUT THE EXPRESS WRITTEN CONSENT FROM CAFSC AND THAT OF ANY PORTION OF THIS DOCUMENT IS HELD TO BE INVALID, THE BALANCE SHALL CONTINUE IF FULL FORCE AND EFFECT.

\_\_\_\_\_  
Participant's Signature

Date \_\_\_\_\_

\_\_\_\_\_  
Parent's/Guardian's Signature (*Parent's/Guardian's Signature is required if Participant is under the age of 18*)

Date \_\_\_\_\_