



Sheboygan Lakers Figure Skating Club

Application for Membership

I. Personal Information – Please Complete the following

First Member/Skater Information

Name: Miss Mrs. Ms. Mr. Full Name _____ DOB ____/____/____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: (____) _____ - _____ Email: _____@_____.

Second Member/Parent/Guardian Information

Name: Miss Mrs. Ms. Mr. Full Name _____ DOB ____/____/____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: (____) _____ - _____ Email: _____@_____.

Membership Type: Home Associate Collegiate* Additional Family Member of A Home Club Member
(Circle One) * Membership Chair concurrence with Collegiate Membership Application
 * Additional Family Members: I would/would not like to designate SLFSC as my Home Club

I am also: a member of _____ FSC. an individual Member of USFS
(Circle One) USFS Member # _____

Primary Activity: Parent/Guardian Coach Competitive Skater Recreational Skater
(Circle One) USFS Official/Officer Club Officer/Board Member Other _____

Other Activities: Adult Skater Synchro College Skater Competitive Skater Coach
(Circle One) Recreational Skater Parent/Guardian USFS Official/Officer Club Official/Volunteer

II. Membership Requirements – Please contact Kassandra Lepak, SLFSC Membership Chair at (920) 980-5853 if you have any questions regarding the following requirements;

- A. Read, understand, and agree to meet the specification of the *SLFSC Membership Guide*.
- B. Satisfy Membership Specification #1, “...Prerequisites of Club Memberships...” as published in the *SLFSA Membership Guide*.

III. Verification – Please indicate by signing below that the information given in Section I are accurate and that you have met the requirements of Section II.

 Applicant’s Signature Date
 (Parent/Guardian if applicant is under 18)

Please send the following items to Kassandra Lepak, 3719 N 48th Street, Sheboygan, WI 53083

- Application for Membership*
- Consent for Medication Attention or Treatment*
- Waiver of Release of Liability*
- Membership Fee (Checks Payable to SLFSC)*

Membership Fees	Full Member	Intro (1 st Time USFS Members Only)	Associate
First Member:	\$75	\$32	\$40
Second Member:	\$30	\$30	\$30