



The Gardens Figure Skating Club of Maryland 2018-19 Membership Form

GFSC & US Figure Skating Membership year is from 7/1/18 – 6/30/19

(Please print)

Member's Name: _____ Parent's Name: _____
First Last (If Skater is under 18 Years of Age)

Street Address: _____

City: _____ State: _____ Zip Code: _____

Primary E-mail: _____ Secondary E-mail (optional): _____

Primary Phone: (____) _____ Alternate Phone: (____) _____

Date of Birth: _____ USA Citizen: Yes No Sex: M F

U.S. Figure Skating # _____ (new members leave blank)

Medical Insurance Plan _____

Check One

Home Club	1 st Family Member \$105 <input type="checkbox"/>	Subsequent Family Member \$50 <input type="checkbox"/>
Associate Member	1 st Family Member \$70 <input type="checkbox"/>	Subsequent Family Member \$50 <input type="checkbox"/>
Introductory Member (1 st time USFS)	1 st Family Member \$55 <input type="checkbox"/>	Subsequent Family Member \$45 <input type="checkbox"/>
Collegiate Member	\$75 <input type="checkbox"/> * 4 year membership. Must provide proof of college enrollment	
Club Skating Professional - Home**	1 st Family Member \$60 <input type="checkbox"/>	Subsequent Family Member \$24 <input type="checkbox"/>
Club Skating Professional - Associate**	\$0 <input type="checkbox"/>	

**** Club Skating Professionals must include a copy of liability insurance with membership form**

Highest Test Level Passed:

Field Moves _____ Freestyle _____ Dance _____

Basic Skills _____ Pairs _____

- **Primary Activity** (Select One)
 - Parent/Guardian
 - USFS Official/Officer
 - **Select any others that apply**
 - Adult Skater
 - Parent/Guardian
 - **Eligibility Status** (Select One)
 - Eligible
- Coach
 - Club Officer/Board
 - Synchro
 - Coach
 - USFS Official/Ofcer
 - Ineligible
- Competitive Skater
 - Other
 - Collegiate
 - Club Official/Volunteer
 - Restricted
- Recreational Skater
 - Competitive Skater
 - Recreational Skater

Mail this membership form and applicable fees to the Membership Chairperson. You may also pay by credit card. Please include the second page with your information. Please refer to the Membership fees listed above. Please be sure to include any documentation required (i.e. insurance certificate, proof of college enrollment) for special memberships.	<i>Please make checks payable to:</i> <i>Gardens FSC</i> <i>Mail to:</i> <i>Shelley Smith</i> <i>The Gardens FSC of MD</i> <i>5455 Columbia Rd Apt 237</i> <i>Columbia, MD 21044</i>	Club use only: Date Rec'd _____ Check # _____ Amount _____ Entry Date _____
---	---	---

In consideration of my participation in any Gardens Figure Skating Club (GFSC) or 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 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 Releases 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 U.S. Figure Skating, GFSC, their respective administrators, directors, agents, officers, volunteers, and employees, and any sponsors and advertisers of any GFSC or U.S. Figure Skating sanctioned event in which I participate (each considered one of the Releases herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the Releases. This release, waiver of liability and express assumption of risk agreement does not apply to any liability, claims, demands, losses, or damages arising out of the gross negligence of, or intentional, willful or wanton misconduct of Releases against any of the Releases, I will indemnify, defend, save, and hold harmless, each of the Releases 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 or risk agreement and fully understand it.

SafeSport Statement for Membership Renewal

The Gardens Figure Skating Club of MD is committed to creating a safe and positive environment for members' physical, emotional and social development and ensuring that it promotes an environment free of misconduct.

The following code of conduct applies to all participants in activities hosted, supported, sponsored or engaged in by U.S. Figure Skating and the Gardens Figure Skating Club of MD including but not limited to competitions, exhibitions, training camps and local rink activities.

I recognize that my participation or my child's in all the activities associated with U.S. Figure Skating and the Gardens Figure Skating Club of MD is an honor and privilege that carries certain responsibilities. I agree to fully abide by the rules and guidelines set forth by U.S. Figure Skating or its properly designated agents.

U.S. Figure Skating Member Code of Conduct GR 1.02

I recognize that my participation in all activities hosted, supported, sponsored or engaged in by U.S. Figure Skating, including but not limited to competitions, exhibitions and training camps, is an honor and privilege that carries certain responsibilities. I agree to fully abide by the rules and guidelines set forth by U.S. Figure Skating or its properly designated agents. As a precondition to participation in activities hosted, supported, sponsored or engaged in by U.S. Figure Skating, I will adhere to the following tenets in good faith:

- A. I will exhibit the highest standards of fairness, ethical behavior and genuine good sportsmanship in all of my relations with others.
- B. I will not damage public or private property. I understand that I may be held financially responsible for damage deemed to be wantonly or willfully executed on my part, and that I may be subject to disciplinary action by U.S. Figure Skating.
- C. I will not use or possess illegal drugs, and I will not engage in criminal activity. I understand that, if I am found to use or possess illegal drugs, or if I am found to engage in any criminal activity during any activity hosted, supported, sponsored or engaged in by U.S. Figure Skating, I may be subject to criminal penalties as well as penalties imposed by U.S. Figure Skating.
- D. I will adhere to the rules of U.S. Figure Skating and the host organization at all activities hosted, supported, sponsored or engaged in by U.S. Figure Skating.
- E. I will comply with all applicable anti-doping rules including, but not limited to, ISU and USADA anti-doping rules.
- F. I will conduct myself in a manner not detrimental to the welfare of figure skating. I understand that my actions reflect on U.S. Figure Skating and the sport of figure skating both positively and negatively. I understand that if my acts, statements, or conduct are considered detrimental to the welfare of figure skating by the appropriate authority, I may be subject to penalties imposed by U.S. Figure Skating pursuant to GR 1.04.
- G. I understand that the penalties that may be imposed may include, but are not limited to, loss of future international selections, loss of financial support from U.S. Figure Skating and its Memorial Fund, and loss of participation in activities hosted, supported, sponsored or engaged in by U.S. Figure Skating.
- H. I understand that all disciplinary proceedings will be conducted pursuant to Article XXV, Section 3, of the U.S. Figure Skating bylaws, and that my rights and remedies are derived therefrom.

Skater's Signature (18+ years) (Parent/Legal Guardian Signature) Date: _____

Revised on 6/3/2018

If paying by credit card, please include the following information.

Name on VISA/MC _____

VISA/MC # _____

Expiration Date _____

Three Digit Security Code _____

Gardens Figure Skating Club of Maryland

(name of club)

**Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement
("Agreement")**

In consideration of participating in Gardens Figure Skating Club of Maryland activities, I represent that I understand the nature of figure skating activities ("activity") and that I am qualified, in good health and in proper physical condition to participate in such "activity". I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the "activity".

I fully understand that this "activity" involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the "activity", the conditions in which the "activity" takes place, or the negligence of the "releasees" named below; and that there may be other risks either not known to me or not readily foreseeable 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 Gardens Figure Skating Club of Maryland, United States Figure Skating, it's directors, officers, administrators, sponsors, volunteers, agents, employees, staff, instructors, trainers, other participants and if applicable, owners and lessors of premises on which the "activity" takes place (each considered one of the "Releasees" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk, I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, 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.

The Gardens Figure Skating Club of Maryland has the right, but not the obligation, to provide rules, regulations and/or ice monitors for Club Ice. We hereby acknowledge that the Gardens Figure Skating Club of Maryland shall not be responsible for the supervision of the members at Club Ice.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

Printed Name of Participant _____

Date _____

Signature of Participant _____

PARENTAL CONSENT AND INDEMNIFICATION AGREEMENT

I, the minor's parent and/or legal guardian, understand the nature of the above referenced activities and the minor's experience and capabilities and believe the minor to be qualified to participate in such "activity". I hereby release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses, or damages on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claims against any of the above Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasees may incur as the result of any such claim.

_____ Date _____
Printed Name of Parent/Guardian

Signature of Parent/Guardian

Consent for Medical Attention or Treatment

I certify that I, the member, or I, the parent/guardian of said participant, give my consent to the Gardens Figure Skating Club of Maryland and the facility the activities are taking place in and their staff and to members of the Gardens Figure Skating Club of Maryland, their Board of Directors and volunteers to obtain medical care from any licensed physician, hospital or clinic, including transportation and emergency medical services, for myself/ourselves and/or said participant for any injury that could arise from participation in these activities.

Name of 1st Minor Child Member (please print)

Name of 2nd Minor Child Member (please print)

Name(s) of Parent(s)/Guardian(s)
(please print)

1st Parent/Guardian Signature _____ Date _____

2nd Parent/Guardian Signature _____ Date _____

Name of 1st Adult Member
(please print)

1st Adult Member Signature _____ Date _____

Name of 2nd Adult Member
(please print)

2nd Adult Member Signature _____ Date _____

This Consent for Medical Attention shall be binding and effective for the 2018-2019 membership year of Gardens Figure Skating Club of Maryland.