

U.S. Figure Skating Membership Registration

CLUB NAME: _____ CLUB # _____

INFORMATION - MUST BE COMPLETE

1st Family Member

OR

Subsequent Member

Please circle: Mr. Ms. Miss Mrs. PREVIOUS USFSA# and/or PREVIOUS CLUB: _____

NAME: FIRST MI LAST

ADDRESS:

CITY: STATE: ZIP:

TELEPHONE: BUS. - - HOME - -

E-MAIL: _____ @ _____ SEX: M or F DOB: MO DAY YR USA CITIZEN: Y or N

1. ARE YOU A SKATING COACH OR CHOREOGRAPHER? Y or N
2. ARE YOU COMPENSATED FOR COACHING? Y or N
3. HAVE YOU EVER PARTICIPATED IN ANY UNSANCTIONED SHOWS/EVENTS/COMPETITIONS? Y or N
 - a. IF YES, WHEN? _____
 - b. WERE YOU REINSTATED FOR THIS ACTIVITY? Y or N