

# 2009-2010 BOWLING GREEN SKATING CLUB

## HALF YEAR PRO-RATED REGISTRATION FORM



**Please Print Legibly**

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

Skater's Name: \_\_\_\_\_ USFS # \_\_\_\_\_

Address: \_\_\_\_\_ Birth Date: \_\_\_\_\_

\_\_\_\_\_ Please Circle: M or F  
 (City) (State) (Zip)

Cell # \_\_\_\_\_ Work # \_\_\_\_\_ Home # \_\_\_\_\_

Parent(s) if minor: \_\_\_\_\_

Address if different than above: \_\_\_\_\_

Email Address: \_\_\_\_\_

Skaters Current Level of Freestyle: \_\_\_\_\_

**Please Check Only One Membership**

- |       |   |                      |                 |
|-------|---|----------------------|-----------------|
| _____ | Primary Competitor Membership<br>(includes Youth, Adult & Synchro Skating Programs) | <del>\$ 130.00</del> | <b>\$ 65.00</b> |
| _____ | Secondary Membership  | <b>\$ 65.00</b>      |                 |
| _____ | Associate Membership  | <b>\$ 65.00</b>      |                 |

**Additional fees for Youth, Adult & Synchro Programs will be collected separately.**

**Make checks payable to: Bowling Green Skating Club**  
**Please mail all completed membership forms along with your membership fee to:**  
 Bowling Green Skating Club  
 P.O. Box 566  
 Bowling Green, OH 43402

**Contacts:**

Sharon Kruse	<a href="mailto:krush@bright.net">krush@bright.net</a>	419-264-6868
Pat Rabb	<a href="mailto:rabb1960@metalink.net">rabb1960@metalink.net</a>	419-354-4730
Linda Wenner	<a href="mailto:wennerl@bex.net">wennerl@bex.net</a>	419-878-0826

**Membership Categories and Fees:**



- Associate Member \$65** - Non-skating members who support BGSC.
- Secondary Member \$65** - Skating members whose primary membership is with a different USFS club.
- Primary Member \$130 \*** - Skating members who compete individually or on a team and/or test, along with skating members who participate in either a Youth or Adult Program. Additional fees will apply for those programs.

\* Fee is \$65 when becoming a BGSC member in January or when participating in Winter Programs/Sessions

# 2009-2010 Bowling Green Skating Club

## RELEASE FORM

Parents and/or Adult participants, please complete this release as indicated below:

I, \_\_\_\_\_ of (Address) \_\_\_\_\_  
City of \_\_\_\_\_ State of \_\_\_\_\_ voluntarily desire to enroll myself/my  
child, \_\_\_\_\_, in programs offered by the Bowling Green Skating Club. I certify  
that I am cognizant of all-inherent dangers, risks and hazards associated with figure skating.

In consideration of being permitted to enroll, I hereby voluntarily assume all risks of accidents or injury to my person or property. Whether foreseen or unforeseen. I hereby release the Bowling Green Skating Club, it's employees, agents or representatives from any claim, liability, demand or suit of any kind sustained, whether or not caused by the negligence of the Bowling Green Skating Club, it's employee's, agents or representatives. I further agree to indemnify and hold the Bowling Green Skating Club, it's employee's, agents or representatives harmless from any claim, liability, demand or suit arising out of any alleged malfeasance or nonfeasance arising in connection with programs offered by the Bowling Green Skating Club. This release shall be binding upon all my heirs, administrators, executors and assigns.

I represent that I am of lawful age and legally competent to sign this release; that I have signed this document as my own free act.

### **Please check yes or no for the following:**

Yes \_\_\_\_\_ No \_\_\_\_\_ I give the Bowling Green Skating Club (BGSC) permission to post my picture on to the BGSC web, bulletin board, or the BGSC Newsletter.

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## VOLUNTEER PROGRAM FORM

The BGSC is primarily operated by volunteers. In fact, the success and growth of the club depends on each family committing to support the club through volunteer hours. The BGSC has a mandatory work program for skaters with primary membership and **each family** will be required to put in ten (10) hours for the 2009-2010 season (5 hours for pro-rated members). This year's volunteer program began July 1, 2009 and ends April 30, 2010. Any family not completing the required hours by the end of the skating season, will be assessed a **\$10.00 per hour** charge for hours not worked. Each member does have the option to pay for volunteer hours.

1. I understand that by completing the membership packet that the skater is a member of the Bowling Green Skating Club for the entire year. For those skaters with a primary membership with the Bowling Green Skating Club I agree to complete the mandatory volunteer hours.
2. I understand that the Bowling Green Skating Club will make every attempt to contact me about volunteer opportunities; however, it is ultimately my responsibility to ensure that I complete the mandatory volunteer hours. I understand that I should pay attention to the club's newsletters, emails, website, and bulletin boards to actively look for volunteer opportunities. I understand that I should contact the Volunteer Committee members or skating club board members to actively look for volunteer opportunities.
3. I understand that it is my responsibility to fill out the necessary paperwork to document the volunteer hours that I complete.
4. At the end of the skating season, I agree to pay the Bowling Green Skating Club \$10 per hour for each hour not worked.
5. I understand that failure to complete the volunteer hours or make payment for volunteer hours not worked will cause the skater to be ineligible to test or compete after June 30, 2009. I also understand that any future membership in the skating club will be denied until all debts have been settled.

**Please check any items on the list below or add any that you are interested in volunteering for.**

<input type="checkbox"/> Food Donations	<input type="checkbox"/> General Sessions/Ice Monitor	<input type="checkbox"/> BG Holiday Parade
<input type="checkbox"/> Youth Skating Committee	<input type="checkbox"/> Used Skate Sale	<input type="checkbox"/> Competitions
<input type="checkbox"/> Newsletter	<input type="checkbox"/> Fundraising Committee	<input type="checkbox"/> Concession Stand

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**By signing below, I certify that I have read and fully understand the conditions therein provided.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

*(Parent/Guardian's signature if under 18 years of age)*