



# Liberty Figure Skating Club of Philadelphia



P.O. Box 102 Montgomeryville, PA 18936 Ph 215-233-1399

## MEMBERSHIP FORM

### \$90 Annual Membership fee for Individuals

Fee includes one USFSA Membership. ( Membership for additional family members, \$20 each)

Please complete one membership form for each applicant.



This application for the first family member \_\_\_\_\_ additional family member \_\_\_\_\_

Name: \_\_\_\_\_  
(First) (Middle initial) (Last)

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phones: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Work) \_\_\_\_\_

E-Mail: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Are you currently a member of the USFSA? \_\_\_\_\_ USFSA # \_\_\_\_\_

What is your current Home Club? \_\_\_\_\_

Would you like to make LFSC your Home Club? \_\_\_\_\_

### Skating Interests and Activities

(Please check all those that apply so that we can contact you with appropriate program information)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Recreational Skating | <input type="checkbox"/> Freestyle            | <input type="checkbox"/> Ice Shows             |
| <input type="checkbox"/> Competitive Skating  | <input type="checkbox"/> Ice Dancing          | <input type="checkbox"/> Parties/Social Events |
| <input type="checkbox"/> Coach/Choreographer  | <input type="checkbox"/> Pairs                | <input type="checkbox"/> Judge                 |
| <input type="checkbox"/> Non-Skating          | <input type="checkbox"/> Ensemble/Ice Theatre | <input type="checkbox"/> Volunteer             |

*I hereby apply for membership in the Liberty Figure Skating Club and agree to pay the applicable annual dues. I agree to comply with the Bylaws and rules of the Club.*

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Signature of Parent if Applicant is under 18 years of age)

Print Name \_\_\_\_\_  
Rev 5/12/08