APPLICATION FOR INTERIM CLUB MEMBERSHIP

1. Name of proposed club__________________________________________________________

2. Name and physical address of principal skating headquarters____________________________

3. Club contact name/phone/email:____________________________________________________

4. Names of present officers: (Officers must certify that they are eligible persons. See Eligibility Rules in the official rulebook.) Please attach another list of remaining board members and positions.

   President ________________________________________________________________
   (Print Name) ______________________ (Signature) ___________________________
   (Street Address) ______________________ (City/State/Zip) ______________________
   (email) __________________________

   Vice President _____________________________________________________________
   (Print Name) ______________________ (Signature) ___________________________
   (Street Address) ______________________ (City/State/Zip) ______________________
   (email) __________________________

   Secretary _________________________________________________________________
   (Print Name) ______________________ (Signature) ___________________________
   (Street Address) ______________________ (City/State/Zip) ______________________
   (email) __________________________

   Treasurer _________________________________________________________________
   (Print Name) ______________________ (Signature) ___________________________
   (Street Address) ______________________ (City/State/Zip) ______________________
   (email) __________________________

5. Date of last election of Directors_________ Elected or appointed by whom? ________________

6. Date of last election of Officers_______ Elected or appointed by whom? ________________

7. Number of members
   a. number of adult members (minimum of 10) __________
   b. number of members under 18 years of age __________
8. Date present membership started skating as an organized group or club________________(determined by the date of
election of officers and directors and adoption of bylaws and constitution.)

9. Has club made arrangements with the rink for private time to be used exclusively by the club membership?
   Yes__ No__ Weekly___ Monthly__ Season___ Other______________

10. List categories of membership below and dues: ________________________________________________
    _______________________________________________________________________________________
    _______________________________________________________________________________________

11. Does club ___ or rink ___employ skating instructors/coaches?

12. Name of U.S. Figure Skating member club(s) whose principal skating headquarters are nearest the skating
    headquarters of your proposed club.
    _______________________________________________________________________________________
    _______________________________________________________________________________________
    _______________________________________________________________________________________

The following is to be signed by the president and secretary of the applicant club:

We have read the rules in the current edition of the official rulebook. If applicant club is
admitted to membership in the association, it hereby agrees to abide by the rules of U.S. Figure
Skating and acknowledges the right of the association to determine the eligibility status of any of
its members.

By__________________________   __________________________
                  President                                Secretary

Date____________________________

Note: Send completed application and the following enclosures to: U.S. Figure Skating, 20 First Street,
Colorado Springs, CO 80906.

1. **Check or money order for $50.00**
2. Copy of Constitution and/or Bylaws
3. Membership Roster
4. Board of Directors & Officers roster
5. Minutes of the organizational meeting and election or appointment of
   officers and directors
6. Verification of arrangements for exclusive ice time

**MEMBERSHIP COMMITTEE ACTION**

Date Application Received __________ Approved_____ Disapproved__________

__________________________________________   __________________________
Membership Committee Vice-Chair                                 Date

__________________________________________   __________________________
Membership Committee Chair                                     Date