



Arrowhead Figure Skating Club

APPLICATION FOR MEMBERSHIP
NEW MEMBERS ONLY

NAME:				OCCUPATION:	
ADDRESS:				PHONE: ()	
CITY:			STATE:	ZIP CODE:	
AGE (IF UNDER 18):		BIRTHDATE: / /		ARE YOU AN AMATEUR?	
HIGHEST USFSA TESTS PASSED:	FIGURE	MOVES	FREE SKATE	PAIRS	DANCE
E-MAIL ADDRESS:					

MEMBERSHIP FEES:	Junior (16 and under)	Senior
If Arrowhead FSC is Home Club	\$73.00	\$75.00
Second Family Member	\$50.00	\$52.00
If Arrowhead FSC IS NOT Home Club	\$30.00	\$30.00

NAME OF HOME CLUB	USFSA NO:
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First Family membership (Home Club) includes one year subscription to SKATING magazine.

If my application for membership in the Arrowhead Figure Skating Club is accepted, I agree to abide by all rules and regulations of the club and to support club activities. I understand that the club reserves the right to refuse or cancel memberships and that the club assumes no responsibility for any injury which any members may sustain.

Date: _____

Signature of applicant

Signature of parent or guardian

Mail completed form with check made out to:
ARROWHEAD FIGURE SKATING CLUB

TO: Wayne Hundley
2415 Mt. Vernon Avenue
Riverside, CA 92507