



# 2010-2011 Jamestown Skating Club Membership



Name \_\_\_\_\_  
Dr. \_\_\_\_\_  
Mr. \_\_\_\_\_  
Mrs. \_\_\_\_\_  
Miss \_\_\_\_\_ (First) (MI) (Last)

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_ Gender:  M  F  
(Check one)

USFS# \_\_\_\_\_ Date of Birth \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_  
(Circle one)

Current Test Level (FS) \_\_\_\_\_ US Citizen :  Yes  No  
(Check one)

E-Mail \_\_\_\_\_ 2010-11 Grade Level (if applicable) \_\_\_\_\_

Previous Home Club (transferring applicants only) \_\_\_\_\_

### Skaters under age 18:

Parent/Guardian Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Parent/Guardian E-mail \_\_\_\_\_

***\* all information provided for the use of the JSC and WVTSA only \****

Membership year coincides with the USFS Membership year: July 1<sup>st</sup> through June 30<sup>th</sup>. Fees for the Jamestown Skating Club membership are as follows:

New and Renewing Member.....\$75.00 (Includes both USFS and JSC fees and *Skating* magazine)  
Each Additional Family Member.....\$15.00

***\* Special Pricing May apply for first time US Figure Skating Members and Collegiate Members. \****  
***Please contact Membership Chair for further information***

Please make Checks Payable to the: **Jamestown Skating Club.**

Mail to:

**Jennifer Baudo**  
**2377 South Hill Dr.**  
**Jamestown, NY 14701**  
**716/488-2568**  
**Jennib@stny.rr.com**

Office Use
Received by: _____
Date: _____
Check #: _____
Amount: _____