



2018-2019 PROFESSIONAL MEMBERSHIP FORM



(Please Print)

Name:		USFS#: <u>provide a copy of USFS card</u>	<input type="checkbox"/> New coach <input type="checkbox"/> Returning coach <input type="checkbox"/> Home Club \$85.00* <small>*(includes USFS Membership)</small> <input type="checkbox"/> Associate \$65.00 <input type="checkbox"/> Honorary Member <input type="checkbox"/> Coach Complimentary	
<input type="checkbox"/> Male <input type="checkbox"/> Female	D/O/B: / /	Home Club:		
Mailing Address:		City:	ZIP Code:	
Email Address:		Home Phone: ()	Cell Phone: ()	
Who provides your liability Insurance? <input type="checkbox"/> USFS <input type="checkbox"/> PSA <input type="checkbox"/> Other: <u>provide a copy of insurance certificate</u>				
Liability Insurance Renewal Date:				
How many years teaching experience do you have?				
What is the highest level test you passed?				
Moves:	Figures:	Dance:	Freestyle:	
What is the highest level test your students have passed?				
Moves:	Figures:	Dance:	Freestyle:	

EDUCATION

***Must have CER A or B requirement as per PSA/USFS requirement**

***Must have completed at least one of the following and provide a copy of certificate.**

1. Taken the Basic Accreditation written exam with PSA. Date taken: _____

2. Hold any rating with PSA. List rating and date: Rating: _____ Date: _____

3. Attended a National Conference or Regional Seminar.
Date: _____ Location: _____

In an effort to better inform our perspective new and current members, while providing the proper level of coaching to its skaters, BSC offers two levels of coaching.

Please check one:

LEVEL I: I have an understanding and experience in teaching Pre-Preliminary thru Pre-Juvenile skaters in both freeskate and moves in the field. You must have passed or had a skater pass USFS Pre-Juvenile Moves in the Field/Freeskate or higher.

LEVEL II: I have an understanding and experience in teaching Pre-Preliminary thru Senior skaters in both freeskate and moves in the field. You must have passed or have had a skater pass one of the following: Intermediate Moves in the Field/Freeskate or higher, 4th USFS Figures, Pre-Silver Ice Dance

Make checks payable to Bourne Skating Club and write "Professional Membership" in the memo line.

Mail forms and payment to (please do not email or drop off in club office); do not mail if not complete with all requested forms and copies:

Bourne Skating Club
Attn: Membership
PO Box 284
Buzzards Bay, MA 02532
www.bourneskatingclub.com
Email: administrator@bourneskatingclub.com

AGREEMENT

I understand and agree that if my application is accepted by the BSC, I will abide by all rules, regulations and policies of BSC. I also agree to abide by the Code of Ethics/Tenets of Professionalism set forth by the Professional Skaters Association. I understand that failure to follow any such rules, regulations or policies may result in a loss of my privileges in the sole discretion of the Board of Directors.

I understand and agree with the volunteer hours requirement for all coaches – Home Club Coaches must fulfill 10 hours of volunteer time and Associate Coaches must fulfill 5 hours of volunteer time.

Assumption of Risk and Waiver of Liability: I am aware that figure skating is a dangerous sport, and that my participation as a Professional with BSC is at my sole risk. I hereby agree to release, indemnify and hold harmless Bourne Skating Club and all of their directors, officers, agents, insurers, attorneys and employees from any and all claims, demands, losses, damages or injury, whatsoever, of any kind or nature, that I may sustain as a result of my participation or activities as a Professional of the BSC.

Signature _____

Date _____

Professional Interview Committee Use Only

Discipline(s) approved: On Ice Level I Level II Synchro TOI

Signature _____

Date _____