

# Albuquerque Figure Skating Club Collegiate Membership Application for the 2018 – 2022

The bylaws of both the Albuquerque Figure Skating Club (AFSC) and the U.S. Figure Skating (USFS) govern Membership in the AFSC.

<b>Applicant's Name:</b> _____	<b>USFSA#:</b> _____
<b>Mailing Address:</b> _____	<b>DOB:</b> _____
<b>City and Zip:</b> _____	<b>Gender:</b> <b>Male or Female</b>
<b>Phone: Home</b> _____	<b>US Citizen:</b> <b>Y or N</b>
<b>Phone: Work</b> _____	<b>E-mail:</b> _____

<b>Collegiate Membership</b> (This is a one-time fee that covers a four-year membership. This membership is only available once per person. You are required to be in college/university at the time of application or during the upcoming academic year.)	<b>Total Dues</b>	\$ 95
<b>Required:</b> Attach some form of proof that you are currently enrolled or planning to be enrolled during the upcoming academic year in college/university. For example, attach your letter of acceptance, most current course schedule, or most current grades from your college/university. This applies to Associate, Bachelor, Master, and doctoral degree programs at accredited colleges/universities.		
<b>Tax Deductible donation for additional Club Ice Sponsorship</b> (Donation of tax deductible funds for additional Club Ice is <u>OPTIONAL</u> . Your donation can be in any amount and will be used exclusively for ice.)		\$
	<b>Total</b>	\$
<b>Make checks payable to: <u>AFSC</u></b>	<b>Amount Paid</b>	\$
<b>Mail <u>ALL 3 PAGES</u> to: Nina Kane, 8823 Woodland NE, Albuquerque, NM 87112-2206</b>	<b>Amount Due</b>	\$

**Please DELETE my  Address,  Home Phone,  Work Phone,  e-mail address from the AFSC Club Roster.** (The Club Roster is only available to Board Members.)

I  **Do** or  **Do not** give my permission to have my tests passed, competition results, and/or photographs posted on AFSC Facebook page, website, bulletin board, newsletters or flyers.

I have read and understand the **SafeSport Athlete Protection Policies and Guidelines** and the **Reporting Abuse** documents.

*If the applicant is 18 years or older:*

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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*If the applicant is under 18 years old:*

**Parent/Legal Guardian's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Legal Guardian's Printed name:** \_\_\_\_\_