



The Chagrin Valley Figure Skating Club Membership

Name: _____

Freestyle Level: _____ Moves in the Field Level: _____ LTS Level: _____

Phone #: _____ Cell #: _____ E-Mail: _____

Coach's Name: _____ Coach's Phone #: _____

Skater's Signature: _____ Date: _____

Parent's Signature (for skaters under 18): _____

Fee Schedule

- ___ 1st Home Club Member **\$75**
- ___ 2nd / 3rd Home Club (Skating) Family Member **\$65 / \$55**
- ___ Associate Member **\$50**
- ___ Professional Member **\$50**
- ___ Non-Skating Member **\$35**

Please be sure to include this form which includes the following:

- CVFSC Membership form
- Indemnity Agreement (skating memberships only)
- Photo Release (skating memberships only)
- Emergency Medical Release (skating memberships only)
- USFS Membership form

Check made payable to The Chagrin Valley Figure Skating Club

The Pond
9999 E. Washington St., Auburn Township, OH 44023
Attn: CVFSC Treasurer