

Upper Mountain Skating Association 2008-2009 Member Application

Skater Name			Date of Birth		
Address			Adult Skater: work #		
City			Parent Name (for skaters under 18)		
State, Zip			Parent Work #		
Telephone (    )			Parent Date of Birth		
Fax: (    )			Coach's Name		
<b>E-Mail Address –REQUIRED FIELD– Skater</b>			<b>E Mail Address (Parent) – REQUIRED FIELD</b>		
Current USFSA Number			Current USFSA Exp.Date		
PSA Number (Coach)					
Home Club			High School/College Graduation Date		
Please indicate highest test level passed: if applicable					
MIF	Free	Dance	Figures	Pairs	Basic Skills/ISI

Please fill in the following information:

I am renewing my UMSA/USFSA membership

OR

I am not a member of USFSA

I am a new member of USFSA

My membership is expired

OR

I have a current USFSA number

I am applying for membership to UMSA

I am applying for a change of home club to UMSA.\*

I am a home club member of \_\_\_\_\_ and applying  
for associate membership

\*Note: If you are requesting a change of home club to Upper Mountain Skating Association you must provide written release from your current home club. This is only required if you have renewed your club membership for the 2008-2009 season.

**Membership Fees**

	Home Club UMSA	Associate Member UMSA	
Skater over 18/Adult Skater	<b>\$70.00</b>	\$45.00	N/A
Family Membership (Skater under 18/ & financially responsible parent)	<b>\$80.00</b>	\$55.00	N/A
Additional Family Member	\$20.00 per member	\$20.00 per member	N/A
Crossover(skater under 18)	N/A	N/A	N/A
Coach**must first follow Coaches Registration	<b>\$45.00</b>	\$40.00	N/A

Payment Due: \_\_\_\_\_

Check Number: \_\_\_\_\_

**Please make checks payable to Upper Mountain Skating Association. Return form and payment to:**

**Upper Mountain Skating Association  
C/o Susan Welsh  
73 Sam Bonnell Drive  
Clinton, NJ 08809**

We need you to volunteer for a committee. It is now mandatory as part of your club membership to help serve your skaters and make our club a strong club. Please indicate your top three choices (1, 2 or 3) in the space on the membership application located next to the committee you would like to serve on. The committee chair will contact you during the season. The success of the club and the skaters depend on your participation. Together we can make UMSA the great club we know it can be.

**Committees**

\_\_\_\_\_ Competition Committee  
 \_\_\_\_\_ Fundraising Committee  
 \_\_\_\_\_ Membership Committee  
 \_\_\_\_\_ Program Development  
 \_\_\_\_\_ Test Committee

\_\_\_\_\_ Exhibition Committee  
 \_\_\_\_\_ Hospitality  
 \_\_\_\_\_ Newsletter/Publicity  
 \_\_\_\_\_ Synchronized Skating  
 \_\_\_\_\_ Web Support