

**INSTRUCTIONS:**

- Complete the application and submit it to the club office
- Choose a skating plan and pay the appropriate amount for your membership (other fees are deferred for a month)
- Your provisional membership and skating privilege(s) start immediately while our Membership Admissions Committee reviews your application
- During the provisional period, you will meet other members and get to know our friendly and helpful environment
- After your one month provisional membership expires you will be required to pay the Initiation Fee and Capital Assessment and at that time will become a full member

## Philadelphia Skating Club & Humane Society – Membership Application

Member information (parents/guardians for members under 18)			
<b>Name</b>	<b>Date of Birth</b>	<b>Employer &amp; Position</b>	<b>Skating privilege?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Spouse</b>	<b>Date of Birth</b>	<b>Employer &amp; Position</b>	<b>Skating privilege?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Mailing Address</b>			
<b>City</b>		<b>State</b>	<b>Zip</b>
<b>Home Phone</b>	<b>Cell Phone 1</b>		<b>Cell Phone 2</b>
<b>Email Address 1</b>		<b>Email Address 2</b>	
<b>Children</b>	<b>Birth date</b>	<b>School &amp; Grade</b>	<b>Skating privilege?</b>
			Yes <input type="checkbox"/> No <input type="checkbox"/>
			Yes <input type="checkbox"/> No <input type="checkbox"/>
			Yes <input type="checkbox"/> No <input type="checkbox"/>
			Yes <input type="checkbox"/> No <input type="checkbox"/>

Release
<p>In consideration of the participant being permitted to register and participate in ice skating at The Philadelphia Skating Club &amp; Humane Society, we do hereby forever release and discharge its Directors, Agents, Employees and any person or corporation connected herewith from all manner of action, injury, damages, costs, claims or demands which we will, shall, or may hereafter suffer or receive by reason of each participant in any program at The Philadelphia Skating Club &amp; Humane Society. Release shall be binding on our heirs, assigns, executors and administrators. It is further agreed that The Philadelphia Skating Club &amp; Humane Society shall not be considered to guarantee or warrant such equipment as may be used in the conducting of said ice skating program. I also hereby agree to permit the video recording and/or photography of this activity for purposes of program advertisement by PSCHS.</p>
<p><b>Signature</b> _____ <span style="float: right;"><b>Date</b> _____</span></p>

Skating Plans				
<b>Unlimited Skating Plans</b>			<b>Sep-Jun Club</b>	<b>Oct-Apr Winter</b>
<input type="checkbox"/>	Family/Individual	Unlimited skating for 1	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Family 2 Skaters	Unlimited skating for 2 members of same household	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Family All Skaters	Unlimited skating for 3+ members of same household	<input type="checkbox"/>	<input type="checkbox"/>
<b>Limited Skating Plans</b>			<b>Sep-Jun Club</b>	<b>Oct-Apr Winter</b>
<input type="checkbox"/>	Family/Individual	Limited skating for 1 (2 sessions per week)	Not Offered	<input type="checkbox"/>
<input type="checkbox"/>	Family Recreational	Weekend family sessions (covers entire family)	Not Offered	<input type="checkbox"/>
<b>Special Skating Plans</b>			<b>Sep-Jun Club</b>	<b>Oct-Apr Winter</b>
<input type="checkbox"/>	Coach	1 session per week with coach	Not offered	<input type="checkbox"/>
<input type="checkbox"/>	Team	Practice with team only	Not offered	<input type="checkbox"/>
<input type="checkbox"/>	Junior competitor	Unlimited skating for competitors under 18 years of age	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	30 Day Trial	Unlimited skating for 30 day period <input type="checkbox"/> Individual <input type="checkbox"/> Family	N/A	N/A

**How did you hear about us?**  
 Friend/neighbor     Newspaper     Yard sign     Email     Facebook/Twitter     Club member

**We are a volunteer-based organization. How can you help us?**  
 Marketing     IT     Test sessions     Competitions     Finance     Music     Events

For Office/Member Admissions Committee use only

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Signature of Proposer

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Supporter #2 Signature

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Supporter #3 Signature

Date Received _____
Committee Approval Date _____