



Ice Skating Club of Indianapolis

2016-2017 APPLICATION YEARLY*MEMBERSHIP

Must Renew Annually (July 1, 2016 - June 30, 2017)

USFS Membership is required for ISCI Membership.

If Skater Is Under 16 Years Old, A Family Membership With At Least One Parent Is Required.

Applicant Name(s)		USFS # (if known)	DOB (not required for adults)
Skater(s):			
Parent(s):			
Address		City, State, Zip Code	

Home Phone#	*Parent Cell Phone#	Skater Phone #	E-mail: Skater (please PRINT clearly)	E-mail: Parent (please PRINT clearly)

*Parent # required if parent will not be present during club sessions and skater is under 16 years old

Skater's primary coach: _____

Last year's Home Club Affiliation: _____ City: _____ State: _____

Membership Dues: Family Membership is required if skater under 16

- ISCI Dues: Family or Individual with one skater purchasing unlimited ice plan* \$175 \$ _____
 Family with >1 skaters purchasing unlimited ice plan* \$200 \$ _____
 Family or Individual electing NOT to purchase unlimited ice plan* \$250 \$ _____
 Collegiate (\$75 due on first year as collegiate, valid for 4yrs) \$75 \$ _____
 Associate Member **Dues: Purchasing unlimited ice plan* \$50 \$ _____
 NOT to purchase unlimited ice plan* \$75 \$ _____

* Unlimited Ice plan - separate contract required

**Associate member must already be a member of another USFS sanctioned club

- ISCI Dues: Non-skating, USFS Official (with Board Approval) \$75 \$ _____

USFS Registration Dues (required)

- Individual or First Family Member (includes Skating Magazine) \$60 \$ _____
 Or Introductory Membership (1st year in USFSA/club only) \$30 \$ _____
 # _____ Additional Family Members each (reqd if under 16yrs old) \$24 \$ _____
 Collegiate paid to USFS directly \$0.0 \$ Y / N

MEMBERSHIP TOTAL

\$ _____

Check #

The below signed hereby submits application for membership with the Ice Skating Club of Indianapolis, Inc. (hereinafter referred to as ISCI). It is understood that membership is not transferable and that ISCI reserves the right to reject application for membership. I, and anyone who accepts membership in ISCI by virtue of this application, agree to abide by the constitution, bylaws, rules and regulations of ISCI; understand fully the danger, hazard, and risks incident to ice skating and assume the risk of the same and hereby release ISCI, its members, governors and officers from all claims arising in any manner from participation in ISCI; agree to hold harmless ISCI, its members, governors and officers, from any and all damages to both person and property arising from acts of the applicant herein or anyone who accepts membership in ISCI by virtue of this application; and agree to be responsible for personal injury and damage to Carmel Ice Skadium and/or Arctic Zone which may result from negligent or willful acts of the applicant or those who accept membership by virtue of this application.

DATE: _____ **SIGNATURE OF APPLICANT(s):** _____

DATE: _____ **PARENT SIGNATURE:** _____

Please submit your completed application, USFS form and check payable to ISCI:

ISC of Indianapolis, 1040 3rd Ave SW, Carmel, IN 46032; 317-332-5214

(You can mail in or deposit the contract and check in the ISCI mailbox located outside coach's room near rink#2)



Ice Skating Club of Indianapolis

2016–2017 Season

Unlimited Ice Plan Contract

The Unlimited Ice Plan listed below is contracted for the entire 2016-2017 season. The club season will include a minimum of 75 sessions, from September 2016 to May 2017. Payment can be made in full before September 1st 2016, divided into 2 equal payments due September 1st and January 1st, or paid monthly on the 1st of each month. There will be a \$50 late fee assessed each time a payment is not made by the 8th of the month. Skaters and/or their families are responsible for the full price contracted with no exceptions.

Skaters new to the club or those who have never previously purchased an ice plan will have their ice fees and volunteer hours prorated according to their start date which must be listed below. All other skaters are required to pay the full amount due for an option, regardless of start date. Ice plans may not be split or share between members.

Please select from the options below. All sessions are at the Zotec Partners Carmel Ice Skadium unless noted otherwise in the ISCI handbook or on the ISCI website. You can skate any or all of the following sessions:

- Wednesday 4:30pm-6:30pm
- Friday 5:15pm-7:15pm
- Sunday 4:15pm-5:45pm

Member:

- Purchase Unlimited Ice Plan: (2nd skater in same family \$150 per month)
 - Payment made in full - \$1,692 (\$188 x 9) due September 1st, 2016
 - Payment divided into 2 equal payment - \$855 (\$190 x 9 / 2)
Due September 1st, 2016 and January 1st, 2017
 - Payment monthly - \$195 (\$195 x 9) due on the 1st of each month
*There will be a \$50 late fee added each time payment that is not made by the 8th of the month.
- Not purchasing Unlimited Ice Plan
 - Walk on: \$25 per session

Associate Member:

- Purchase Unlimited Ice Plan:
 - Payment made in full - \$1,980 (\$220 x 9) due September 1st, 2016
 - Payment divided into 2 equal payment - \$1012.50 (\$225 x 9 / 2)
Due September 1st, 2016 and January 1st, 2017
 - Payment monthly - \$230 due on the 1st of each month
*There will be a \$50 late fee added each time payment that is not made by the 8th of the month.
- Not purchasing Unlimited Ice Plan
 - Walk on: \$25 per session

Name of Skater please print _____ Name of Parent please Print _____

Signature of adult skater or parent/guardian _____

Please submit your signed and completed contract and check payable to ISCI to:

ISC of Indianapolis, 1040 3rd Ave SW, Carmel, IN 46032; 317-514-7627

(You can mail in or deposit the contract and check in the ISCI mailbox located outside coach's room near rink #2)



Ice Skating Club of Indianapolis 2016–2017 Seasons Volunteer Information and Form

ISCI Members and families are required to work at least 20 hours (per skating family) during the season. It is the goal of ISCI to generate \$10,000 in funds through fundraising activities each year to contribute towards the cost of Ice time and other club activities

Volunteer and fundraising requirements are as follows:

1. A minimum of 7 hours of volunteer work must be completed at the Tony Todd Memorial 22nd Annual Carmel Invitational Competition on August 6-7, 2016.
2. Sign up for club session monitors
3. Each member is required to participate in club fund raising activities such poinsettias sale, spring flower sale, annual ice show, skate with Santa, etc. New fund raising activities can be proposed by any ISCI member and will count as volunteer hours.
4. Work as part of a club committee. Committee chairperson will certify hours and report to the board all volunteer hours worked for their committee.
5. It is YOUR RESPONSIBILITY to contact the volunteer coordinator or check ISCI web site throughout the year to check on the hours you have worked.
6. If you cannot work as scheduled, you are responsible for finding a substitute and notifying the volunteer coordinator of any changes in the schedule.

NEW MEMBERS who join ISCI after the new season started will have their volunteer hours pro-rated (along with their ice fees) according to the number of club sessions remaining. These hours will be completed by working as above.

MEMBERS WHO DO NOT COMPLETE THEIR REQUIRED VOLUNTEER HOURS BY APRIL 15, 2017 WILL BE ASSESSED \$25 PER HOUR NOT WORKED.

Names of Skaters please print _____ Name of Parent please Print _____
Signature of adult skater or parent/guardian _____

Please submit your signed form to ISCI to:

ISC of Indianapolis, 1040 3rd Ave SW, Carmel, IN 46032; 317-989-1950

(You can mail in or deposit the contract and check in the ISCI mailbox located outside coach's room near rink #2)



Membership Registration

CLUB NAME: _____ CLUB # _____

INFORMATION - MUST BE COMPLETE

1st Family Member OR Subsequent Member

Please circle: Mr. Ms. Miss Mrs. PREVIOUS MEMBER# and/or PREVIOUS CLUB: _____

NAME: FIRST MI LAST

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: HOME - - BUS. - -

E-MAIL: _____ @ _____ SEX: M or F DOB: MO DAY YR USA CITIZEN: Y or N

- PRIMARY ACTIVITY (Choose one): Parent/Guardian Coach Competitive Skater Recreational Skater
 U.S. Figure Skating Official/Officer Club Officer/Board Member Other
- CHECK ANY OTHERS THAT APPLY: Adult Skater Synchro Collegiate Competitive Skater Coach
 Recreational Skater Parent/Guardian U.S. Figure Skating Official/Officer Club Official/Volunteer
- ELIGIBILITY STATUS (Choose one): Eligible Ineligible Restricted
(See eligibility rules)

REV. 3/04



Membership Registration

CLUB NAME: _____ CLUB # _____

INFORMATION - MUST BE COMPLETE

1st Family Member OR Subsequent Member

Please circle: Mr. Ms. Miss Mrs. PREVIOUS MEMBER# and/or PREVIOUS CLUB: _____

NAME: FIRST MI LAST

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: HOME - - BUS. - -

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- CHECK ANY OTHERS THAT APPLY: Adult Skater Synchro Collegiate Competitive Skater Coach
 Recreational Skater Parent/Guardian U.S. Figure Skating Official/Officer Club Official/Volunteer
- ELIGIBILITY STATUS (Choose one): Eligible Ineligible Restricted
(See eligibility rules)

REV. 3/04



Ice Skating Club of Indianapolis

2016–2017 Season

CLUB ICE ETIQUETTE



It is extremely important that skaters and their families, as club member of ISCI, understand the importance of proper etiquette both on and off ice. As representatives of ISCI, our actions reflect upon the club as a whole. ISCI firmly believes in promoting safety, respecting each other and keeping reputation of our club. Good and ethical behavior builds club spirit, unity, cooperation and friendships within ISCI. With this in mind, the following are expectations of all ISCI members and skaters at all times:

On Ice:

1. Dress code: Appropriate skating attire is required at all times. No bare midriffs, blue jeans or offensive logo wear will be allowed.
2. We encourage skaters to refrain from taking cell phones or other personal equipment onto the ice. Items taken onto the ice are the responsibility of the owner and ISCI is not responsible for loss or damage.
3. Skaters should give way to coaches and lessons that are being taught on the ice.
4. Coaches should do their best to pick little-used areas of the ice for their lessons.
5. Skaters must place their CD in neat order according to the first come first serve principle and not jumping around and cut in.
6. Skaters must always be aware of whose music is being played and do their best to give right of way to that skater.
7. When a skater's music is being played, he/she must constantly be aware of the other skaters on the ice. We do ask skaters to give way during another's program, but all skaters are expected to extend common courtesies-to-each other at all times.
8. Dancers have the right of way when dance music is being played.
9. The harness is not to be used during dance music as the full rink is required for most dance patterns.
10. Excessive standing on the ice is prohibited. If you are not skating please leave the ice.

On or Off Ice:

1. **Respect others in ALL situations. Harassment, bullying and abuse of anyone, by anyone, will not be tolerated.** This is in line with the United States Figure Skating Policy and the new US Figure Skating SAFESPORT Program.
2. Media interviews will be held off the ice.
3. Foul or abusive language will not be tolerated.
4. Stealing, consumption of alcoholic beverages, intoxication, drug use and disorderly conduct will not be tolerated.
5. Proper etiquette calls for a spirit of cooperation among all members. Club members should step up and provide support and help as needed, for each other and for ISCI.

I have read and understand the above rules for both on and off ice procedures during ISCI sponsored skating sessions. I will abide by these rules when skating during ISCI session.

Skater _____ Date _____
 Parent – if skater is 16 or younger _____ Date _____
 Skater's Coach _____ Date _____

Please submit your signed consent to ISCI:

ISC of Indianapolis, 1040 3rd Ave SW, Carmel, IN 46032; 317-437-1291

(You can mail in or deposit the consent in the ISCI mailbox located outside coach's room near rink#2)



Ice Skating Club of Indianapolis

2016–2017 Season

Waiver and Release of Liability

Assumption of Risk and Indemnity Agreement (“Agreement”)



In consideration of participating in the Ice Skating Club of Indianapolis activities, I represent that I understand the nature of figure skating activities (“activity”) and that I am qualified, in good health and in proper physical condition to participate in such “activity”. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the “activity”.

I fully understand that this “activity” involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the “activity”, the conditions in which the “activity” takes place, or the negligence of the “releases” name below; and that there may be other risks either known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs and damages I incur as a result of my participation in the “activity”.

I hereby release, discharge and covenant not to sue the Ice Skating Club of Indianapolis, United Figure Skating, it’s directors, officers, administrators, sponsors, volunteers, agents, employees, staff, instructors, trainers, other participants if applicable, owners and lessors of premises on which the “activity” takes place (each considered one of the Releases” herein) from all liability, claims, demands, losses or damages on my account caused or alleged to be caused in whole or in part by the negligence of the “Releases” liability, and assumptions of risk, I, or anyone on my behalf, makes claim against any of the “Releases”, I will indemnify, save, and hold harmless each of the “Releases” from any loss, liability, damage, or cost which any may incur at the result of such claim.

The Ice Skating Club of Indianapolis has the right, but not the obligation to provide rules, regulations, and/or ice monitors for Club Ice. We hereby acknowledge that the Ice Skating Club of Indianapolis shall not be responsible for the supervision of the members at Club Ice.

I have read this **Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement**, understand that I have given up substantial rights by signing it and have signed it freely without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

Printed Name of Participant

Date

Signature of Participant

Parental Consent and Indemnification Agreement

I, the minor’s parent and or legal guardian, understand the nature of the above referenced activities and The minor’s experience and capabilities and believe the minor to be qualified to participate in such “Activity”. I hereby release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the “Releasees” from all liability, claims, demands, losses or damages on the minor’s account caused or alleged to have been caused in whole or in part by the negligence of the “Releasees” or otherwise, including negligent, rescue operations, and further agree that if, despite this release, I, the minor or anyone on the minor’s behalf makes claims against any of the above “Releasees”, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the “Releasees” from any litigation expenses, attorney fees, loss, liability, damage, or cost any “Releasees” may incur as the result of any such claim.

Printed Name of Parent/Guardian

Date

Signature of Parent/Guardian

ISC of Indianapolis, 1040 3rd Ave SW, Carmel, IN 46032; 317-437-1291

(Please sign and submit “Agreement” in the ISCI mailbox located outside coach’s room near rink#2)



Ice Skating Club of Indianapolis
 2016–2017 Season
CONSENT FOR MEDICAL ATTENTION OR TREATMENT

I certify that I, the member, or I, the parent/guardian of said participant, give my consent to the Ice Skating Club of Indianapolis and the facility the activities are taking place in and their staff and members of the Ice Skating Club of Indianapolis, their Board of Directors and volunteers to obtain medical care from any licensed physician, hospital or clinic, including transportation and emergency medical services, for myself/ourselves and / or said participant for any injury that could arise from participation in these activities.

 Printed Name of 1st Minor Child Member Printed Name of 2nd Minor Child Member

Name(s) of Parent(s) / Guardian(s) please Print _____

1st Parent / Guardian Signature _____

2nd Parent / Guardian Signature _____

Name of Adult Member please print _____

Adult Member Signature _____

**The Consent for Medical Attention shall be binding and effective for the
 2016-2017 membership year of the Ice Skating Club of Indianapolis**

Please submit your signed consent to ISCI:
 ISC of Indianapolis, 1040 3rd Ave SW, Carmel, IN 46032; 317-332-5214
 (You can mail in or deposit the consent in the ISCI mailbox located outside coach’s room near rink#2)



Ice Skating Club of Indianapolis
2016–2017 Season
Photo Release Form

I hereby give the Ice Skating Club of Indianapolis, Inc. permission to publish or reproduce in print, electronic, or video format the likeness or image of my child for use in the promotion of the Ice Skating Club of Indianapolis, Inc. social media and its related activities. I release all claims against the Ice Skating of Indianapolis, Inc. with respect to copyright ownership and publication including any claim for compensation related to the use of these materials.

Printed Name of 1st Minor Child Member

Printed Name of 2nd Minor Child Member

YOUR NAME (Parent or Guardian, please print)

YOUR SIGNATURE

DATE

I refuse consent for the use or reproduction of my child’s photograph(s) by the Ice Skating Club of Indianapolis.

YOUR SIGNATURE

DATE

Please submit your signed and completed Photo Release Form to ISCI:
ISC of Indianapolis, 1040 3rd Ave SW, Carmel, IN 46032; 317-332-5214
(You can mail in or deposit the signed form in the ISCI mailbox located outside coach’s room near rink#2)