

MEMBERSHIP APPLICATION 2014-2015

PLEASE PRINT					
First Name					
Surname					
Address					
Date of Birth		Ì	NISA no.	1	
Home Telephone No					
Parents Mobile No					
Name of Coach					
Parent / Guardian Name					
Parents Email Address					
Membership type: Please tick	k appropriate b	ox,ask your child's co	ach if unsure		
Please tick Rising Star (£	20)	Olympia Star (£30)	Olympia	Advanced (£35)	
Declaration: I certify that the by NISA. I agree to abide by permission for my child's polympia Skating Club websolympia facebook page should, any negative commer receive informative emails Signature: Parent/guardian if	y the Olympia picture to be ta site, notice bo ould be used to nts by parents from OFSC re	Figure Skating Club aken and information ard, facebook and n for information by the or skaters will not be	o rules at all times. In about my child be ewspaper articles. In coaches and for the tolerated. It also	I hereby give e published on I understand that the promotion of give permission mail address.	at the f the

Information will be held on computer but will not be disclosed to any third parties. Olympia Figure Skating Club is affiliated to the National Ice Skating Association of Great Britain Ltd (NISA) and is constituted under NISA rules. The principle aims of the Club are to encourage and develop amateur figure skating amongst its members. Members and others using club facilities or attending club functions, do so at their own risk. Non

renewal of membership will result in membership privileges being revoked and skaters will not be allowed in any circumstances to use patch ice sessions until renewal is complete.