



Piney Orchard Figure Skating Team
Live on the Edge!



MEMBERSHIP PACKET 2007 – 2008 SKATING SEASON

Dear Piney Orchard Figure Skating Team Members,

The membership for the Piney Orchard Figure Skating Team is October 1 – September 30. In order to process your application in a timely manner and to ensure that your membership becomes effective October 1, it is important that you complete this packet as soon as possible.

Included in this packet are the forms which need to be completed and returned prior to your membership becoming effective. These forms are necessary due to insurance, liability and Board requirements.

The required forms are:

- Application
- Waiver
- Code of Conduct
- Volunteer Form

All forms and payment (money order or check, made payable to POFST) must be mailed to:

Gretchen Levine
POFST Membership
4873 Jones Drive
Fort Meade, MD 20755

If you have any questions, please email gretchen.levine@comcast.net

Thank you for your interest in the Piney Orchard Figure Skating Team. We are looking forward to a great skating season and hope to see you all at the rink.

POFST Board Members

Team Mission Statement
To build confidence and unity in our skaters through an atmosphere of active support both on and off the ice.



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MEMBERSHIP APPLICATION 2007 – 2008 SKATING SEASON

- Complete all information on this Application (all fields are required), sign the Waiver, Code of Conduct and Volunteer Form. All forms are required for membership.
- Forms and payment (money order or check – made payable to Piney Orchard Figure Skating Team * POFST* - please do not send cash), must be mailed to the following address:
 Gretchen Levine
 POFST Membership
 4873 Jones Drive
 Fort Meade, MD 20755
- As a member, you receive a team pin, the right to vote (for members 18 years of age or older) and a year filled with numerous ice – skating team/family memories.
- Only active members have voting privileges.

_____ **INDIVIDUAL MEMBERSHIP- \$15
 (ONE PERSON)**

_____ **FAMILY MEMBERSHIP - \$25
 (ENTIRE FAMILY)**

NAME OF SKATER(S): _____
NAME OF SCHOOL: _____
GRADE: _____ **BIRTHDAY:** _____
CURRENT ISI LEVEL: _____ **COACH:** _____
CURRENT USFSA LEVEL: _____ **COACH:** _____

FAMILY MEMBERS: (TO BE FILLED IN WITH FAMILY MEMBERSHIP)

NAME: _____	BIRTHDAY: _____
NAME: _____	BIRTHDAY: _____
NAME: _____	BIRTHDAY: _____
NAME: _____	BIRTHDAY: _____
NAME: _____	BIRTHDAY: _____

ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP:** _____
HOME PHONE: _____ **WORK PHONE:** _____
PARENT CELL: _____
***PARENT EMAIL:** _____
***SKATER EMAIL:** _____

(*Please know that email is our preferred method of communication. This email address will be included in a mass team email used strictly for POFST official business.)

FOR OFFICE USE ONLY

_____ DATE RECEIVED	_____ CHECK #	_____ \$ TOTAL	_____ RECEIVED BY
_____ APPLICATION	_____ WAIVER	_____ C.O.C.	_____ VOL. FORM



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WAIVER 2007 – 2008 SKATING SEASON

SKATER'S NAME: _____
 PARENT / GUARDIAN: _____
 ADDRESS: _____
 HOME PHONE: _____ CELL PHONE: _____
 EMERGENCY CONTACT (OTHER THAN PARENT): _____
 ADDRESS: _____
 EMERGENCY CONTACT PHONE: _____
 DOCTOR: _____
 DOCTOR PHONE: _____
 DENTIST: _____
 DENTIST PHONE: _____
 Medical Plan / Insurance _____ Policy # _____
 Applicant has the following health problem or disability: _____

CONSENT FOR PARTICIPATION

I hereby grant permission for my child to participate in the activities of the Piney Orchard Figure Skating Team and certify that my child is physically capable of participating in those activities. I understand that the Team, its officers, members, professionals, coaches and agents assume no responsibility for injuries incurred during the participation in Team Activities. As in any athletic program, I realize that the possibility of injury exists. I understand that reasonable precautions will be made to prevent injuries from happening. I understand that my picture may be used in team publications, advertisements and promotion in print or on the team web page. I further understand that it is my responsibility to notify the club in writing if I want to revoke, or restrict, my permission to use my photograph.

AUTHORIZATION FOR MEDICAL TREATMENT

I authorize the Piney Orchard Figure Skating Team through its professions and supervising officers or agents to secure medical care and treatment for me/my child which may be medically necessary in the event of illness or injury during participation in Team activities.

RELEASE LIABILITY

I recognize that neither rink staff nor Piney Orchard Figure Skating Team officers, board members, professionals, coaches and agents are responsible for my child before, after or during Team activities. I assume responsibility for picking up my child immediately after any Team activity. In recognition of the fact that I/my child may be injured during Team activities, I expressly assume the risk of injury. I release and discharge Piney Orchard Figure Skating Team, its officers, members, professionals, coaches and agents from any and all claims and damages for personal injury and/or property damage which may arise from or out of my/my child's participation in team activities, including but not limited to instruction, use of ice, and participation in ice shows, both on ice and off.

CONSENT TO ABIDE BY RULES AND REGULATIONS

I hereby agree to abide by the by-laws of the Piney Orchard Figure Skating Team and to observe the Code of Conduct, rules, policies of the POFST, and to observe ice etiquette and courtesy at all times. I also agree to observe all rules, policies, and procedures of the Piney Orchard Ice Arena during Team sessions at the rink. I understand that failure to abide by these rules may result in loss of membership.

Signature (of parent/guardian if skater is under the age of 18) _____
 Printed Name of Person Signing Waiver _____
 Date _____



CODE OF CONDUCT 2007 – 2008 SKATING SEASON

Due to certain trends in youth sports whereby both Parents and Members are letting their emotions manifest themselves in abusive and sometimes physical violence, Piney Orchard Figure Skating Team supports a zero tolerance policy for unsportsmanlike behavior. Its Members, Coaches and Parents (if Member is under 18 years old) should continually raise the standard of behavior – both on and off the ice.

Membership in the Piney Orchard Figure Skating Team is a privilege and should carry a sense of pride. Participation in programs offered will require that members and parents (of Members under 18 years of age) accept certain responsibilities.

Members Responsibilities:

- I will not verbally or physically abuse any of my fellow members, officials, team Board members, volunteers or coaches.
- I understand that poor sportsmanship, on or off the ice, will not be tolerated.

Parents / Guardians Responsibilities:

- I will encourage sportsmanship by showing positive support for all members, coaches, Board members and other officials during all on and off ice sessions.
- I will encourage my child to treat all other members, coaches, Board members, and other member's parents and other officials with respect.
- I will not verbally or physically abuse any team members (including my own child), coaches, team Board members, officials, other member parents, or volunteers.
- I will represent myself positively and not undermine the authority of coaches, team Board members, officials, or other team volunteers.

Course of Action:

Should a parent or Member not adhere to the above, the Piney Orchard Figure Skating Team Board Members holds the Member and/or parent accountable and the Board Members are empowered to take necessary action. Actions could be as simple as a verbal warning to the parent or Member up to disciplinary hearings before the Board Members leading to suspension or expulsion from the Piney Orchard Figure Skating Team.

Implementation:

Anyone may file a complaint, in writing and signed, to the President of the Piney Orchard Figure Skating Team.

Member Signature _____

Date _____

Parent / Guardian Signature _____

Date _____

If member is not 18 years of age as of October 1 both member and Parent/Guardian signature are required.



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VOLUNTEER FORM 2007 – 2008 SKATING SEASON

In order for our Team to be successful, each family is encouraged to volunteer during the skating year to help with the Team activities. Without volunteers, many of the planned activities are not possible. Most people find it interesting and fun to get involved with the Team. You meet many people and learn a lot about the “behind the scenes” activities of the sport.

Please place a check next to the activities you are willing to help with. Your name will then be added to a list of members to be called.

_____ **HOSPITALITY:** There are several parties throughout the year where volunteers are needed to help decorate, set-up, assist in distributing food, and clean-up.

_____ **FUNDRAISING:** Approach local businesses for support, such as advertising, donating money / items, sponsoring an event, etc...

_____ **SERVICE PROJECTS:** Help coordinate / or lead a service project such as; Toys for Tots Toy Drive, US Troop Donations, Visit local wounded soldiers, Race for the Cure, etc...

_____ **“REACH FOR THE STARS” COMPETITION:** Assist in our Piney Orchard Annual Competition

_____ **BANQUET/AWARDS:** Assist in decorating, set-up, clean-up, etc..

_____ **OTHER:** Please list _____

Member Name(s): _____

Daytime Phone: _____ Evening Phone: _____

Email Address _____