



Colonial Figure Skating Club, Inc. Guest Professional Registration

Please Print

Guest Professional Name: _____

Date: _____

Address: _____

Phone: _____

City: _____ State: _____

Zip Code: _____

Local Address: _____

Phone: _____

PSA Ratings you hold: _____

Please state the disciplines you intend to coach: _____

Please submit your test certificates indicating your skating level. The Colonial Figure Skating Club, Inc. (CFSC) requires Junior Moves in the Field and one of the following: Junior FS, Junior Pairs or Junior Dance and/or Free Dance.

If you are coaching off-ice dance, please submit an affidavit showing 10 years of training in either Ballet, Jazz, Tap, Modern or any other dance related discipline or 5 years of teaching experience by proof of a letter of reference.

If you are training CFSC skaters in Strength and Conditioning, please submit your current Massachusetts State Board-Certification in Physical Therapy or certification through the National Strength and Conditioning Association.

Thank you for your interest in CFSC. Please read, complete and sign this Registration Agreement, and return it to the Club Office. If you wish to continue coaching at CFSC, please submit a complete application (see office staff for details.)

As a guest of CFSC, and in lieu of the professional membership fee, you must check in at the CFSC office and pay the appropriate professional non-member walk-on fee for each session on which you are teaching. Also, please be sure to provide CFSC with a copy of your current certificate of insurance naming Colonial Figure Skating Club, Inc., Nashoba Valley Olympia, Inc., and Olympus Realty Trust as additional insureds. Failure to do so will result in suspension of privileges.

On-Ice Professionals pay \$8.00 per session.

Office Use Only

Period (1) begins on / / .

Period (2) begins on / / .

Period (3) begins on / / .

Period (4) begins on / / .

Period (5) begins on / / .

Period (6) begins on / / .

Period (7) begins on / / .

Period (8) begins on / / .

Period (9) begins on / / .

Period (10) begins on / / .

Period (11) begins on / / .

Period (12) begins on / / .

Period (13) begins on / / .

Period (14) begins on / / .

___ Completed Registration Form ___ USFS Card No. ___ Completed Registration Agreement
___ PSA ___ Certificate of Insurance ___ USFS Test Certificates

GUEST PRO REGISTRATION AGREEMENT

Guest Professionals agree to teach on CFSC ice according to the following terms and conditions:

1. Guest Professionals are subject to all rules and regulations of CFSC, including the Guest Pro Policy. By completing and signing this Registration Agreement, you agree to familiarize yourself with all rules, regulations and policies of CFSC, and to abide by them. Failure to do so will result in a loss of your privileges. All rules, regulations and policies of CFSC are available in our office.
2. Applications must be made to and approved by the CFSC Office Manager.
3. Prior to using the facility, you must provide a copy of your current USFS card or proof of membership in an ISU member federation and an insurance certificate naming Colonial Figure Skating Club, Inc., Nashoba Valley Olympia, Inc., and Olympus Realty Trust as additional insureds.
4. Guest professionals must check into the office and pay non-member walk-on rates for each session before taking the ice. **On-Ice Professionals pay \$8.00 per session.**
5. You may teach up to 14 days per year. Dance professionals hired to partner members through tests are not limited to 14 days but do not have teaching privileges.

Agreement: I hereby agree to the above terms as a condition of being granted Guest Professional privileges by CFSC. I understand that any violation of the above terms, or any rule, regulation or policy of CFSC may result in a loss of my privileges.

Assumption of Risk and Waiver of Liability: I am aware that figure skating is a dangerous sport, and that my participation as a Guest Professional with CFSC is at my sole risk. I hereby agree to release, indemnify and hold harmless Colonial Figure Skating Club, Inc., Nashoba Valley Olympia, Inc., and Olympus Realty Trust and all of their directors, officers, agents, insurers, attorneys and employees from any and all claims, demands, losses, damages or injury, whatsoever, of any kind or nature, that I may sustain as a result of my participation or activities as a Guest Professional of CFSC.

Guest Professional Signature

Professional Committee Chair

CFSC Office Management