PLEASE TYPE OR PRINT CLEARLY

Name of Club		Club No	
CLUB MAILING ADDRESS			
Address			
City	State	ZIP	
If your club has a business office, please l	list the telephone number		
Web Site			
PRESIDENT	U.S. Figure Skating #	Mail Sent to: 🗖 Club 🗖 Home	
VICE PRESIDENT	U.S. Figure Skating #	Mail Sent to: 🛛 Club 🖵 Home	
TREASURER	U.S. Figure Skating #	Mail Sent to: 🛛 Club 🖵 Home	
SECRETARY	U.S. Figure Skating #	Mail Sent to: 🛛 Club 🖵 Home	
DANCE TEST CHAIR	U.S. Figure Skating #	Mail Sent to: 🛛 Club 🖵 Home	
SGL/PRS TEST CHAIR	U.S. Figure Skating #	Mail Sent to: 🛛 Club 🖵 Home	
MEMBERSHIP CHAIR	U.S. Figure Skating #	Mail Sent to: 🗆 Club 🖵 Home	
PUBLIC RELATIONS CHAIR	U.S. Figure Skating #	Mail Sent to: 🗆 Club 🖵 Home	
SANCTIONS	U.S. Figure Skating #	Mail Sent to: 🛛 Club 🖵 Home	
This form submitted by	Date		
Name of Club	Club No		

ADDITIONAL RINKS USED BY CLUB

Rink Name	Phone	
Address		
City		
Rink Name	Phone	
Address		
City		
Rink Name	Phone	
Address		
City	_State	_ ZIP
Rink Name		
Address		
City	_State	_ ZIP
Rink Name	Phone	
Address		
City	_State	_ ZIP
Rink Name	Phone	
Address		
	State	_ ZIP
City	State	_ ᠘ᡗ