

INDIVIDUAL MEMBERSHIP APPLICATION

Register online at: www.skateisi.org

MEMBERSHIP TERM(S) SEPTEMBER 1 – AUGUST 31

	nembership dues:	1 term - \$15 (through 2 terms - \$25 (through 5 terms - \$50 (through	h 8/31/21)
(Please Print)			
□ New member □ Renev	wal ISI Number		
Rink, Club, or Skating Sc	hool represented (required) Mer	cer County Skating Center -	Mercer County Parks
Last Name		First Name	M.I
Street Address			
City		State/Province	Zip
Country	Phone Number		
Birthdate	Gender (please circle	e) Male Female	
Email address			
accept the risk of injury rest and on behalf of my heirs, a HARMLESS, ICE SPORTS participants, sponsoring ag	ulting from participation. I KNOW assigns, personal representatives S INDUSTRY, their officers, officia encies, sponsors, advertisers, ow AND ALL INJURY, DISABILITY,	INGLY AND FREELY ASSUMI s and next of kin, HEREBY REI als, agents and/or employees, i vners and lessors of premises u	Ige, and agree that: I understand and E ALL SUCH RISKS and, for myself LEASE, INDEMNIFY, AND HOLD instructors, coaches, other used for the activity ("Releasees"), rson or property associated with my
Participant's Signature			
		Date	
Parents/Guardians Signature _			
YMENT TYPE (circle on	(for participants under the ag	Date e of 18)	
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