

# Northern Blades NSC Figure Skating Club Board Member/Chair Application 2020-21 All Applications Due June 15th, 2020

PLEASI	E PRII	NT CLEARLY				
Name:			te:			
		State:		_Zip:		
		U				
Email:						
		s the Club's primary method of communication, so please proceed checked regularly embership you are requesting (please check only one mem			lress that is	
		Board Member (Membership is good for 2 yrs) (If member position prior to termination of their 2 yr term, they must re Club the cost of the membership-\$40)	0		Club Paid	
		Membership Chair or Test Chair Position			Club Paid	

Drop required paperwork in the Club mailbox in Rink #3 or mail to:

**NBNSCFSC** Membership C/O Tania Uhde 20425 Jackson ST NE East Bethel, MN 55011



#### U.S. FIGURE SKATING BOARD MEMBER/CHAIR CODE OF CONDUCT

Northern Blades National Sports Center Figure Skating Club ("NBNSCFSC") is committed to creating a safe and positive environment for members' physical, emotional and social development and ensuring that it promotes an environment free of misconduct.

As a board member of the NBNSCFSC, I am fully committed and dedicated to the mission and have pledged to carry out this mission. I understand that my duties and responsibilities include the following:

- 1. I will actively promote the club in a positive manner.
- 2. I understand my legal responsibilities for the club and those of my fellow board members. I am responsible for knowing and overseeing the implementation of policies and programs, including the SafeSport Program.
- 3. I accept the bylaws and operating principles and understand that I am responsible for the health and well-being of this club and adhering to the member code of conduct of U.S. Figure Skating.
- 4. I promise to be fiscally responsible for this organization. I will make myself aware and knowledgeable regarding our budget and finances and will take an active part in reviewing, approving, and monitoring the budget and fundraising to meet the goals of our club.
- 5. I will actively engage in fundraising for this organization. These may include individual solicitation, undertaking special events, and the like. I am making a good faith agreement to do my best and to raise as much money as I can.
- 6. I promise to treat my fellow board members and other club members with respect. When conflict occurs, I will respectively disagree and work for a compromise that is in the best interest of the club.
- 7. I will attend board meetings, be available for phone consultation, and serve on at least one club committee. If I am not able to meet my obligations as a board member, I will offer my resignation.



		the SafeSport Program and what it enco www.SafeSport Handbook provided by USFS.	mpasses and have
	3	hreats and harassment will not be tolera-	ted and should be
	I have been informed of w currently being abused, bullie	ho to contact if I witness, overhear a ceed or harassed.	conversation or am
	I will work and conduct my USFSA.	self in compliance with the SafeSport Pro	ogram enacted by
Pri	nted Name of Participant	Signature of Participant	Date



### WAIVER & RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT ("AGREEMENT")

In consideration of participating in Northern Blades National Sports Center Figure Skating Club ("NBNSCFSC") activities, I represent that I understand the nature of figure skating activities ("activity") and that I am qualified, in good health and in proper physical condition to participate in such "activity". I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the "activity". I fully understand that this "activity" involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the "activity", the conditions in which the "activity" takes place, or the negligence of the "releases" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in the "activity". I hereby release, discharge, and covenant not to sue the Northern Blades National Sports Center Figure Skating Club, United States Figure Skating, it's directors, officers, administrators, sponsors, volunteers, agents, employees, staff, instructors, trainers, other participants and if applicable, owners and lessors of premises on which the "activity" takes place (each considered one of the "Releases" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "releases" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk, I, or anyone on my behalf, makes a claim against any of the Releases, I will indemnify, save, and hold harmless each of the releases from any loss, liability, damage, or cost which any may incur as the result of such claim. The MIDNICCESC has the right, but not the obligation to provide rules regulations and/or ice monitors for n

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AGREEMENT, understand that I have freely and without any inducement cand unconditional release of all liabi	LIVER OF LIABILITY, ASSUMPTION OF Fingiven up substantial rights by signing or assurance of any nature and intendity to the greatest extent allowed by I to be invalid, the balance, notwithstand	it and have signed it it to be a complete aw and agree that if
Printed Name of Participant	Signature of Participant	Date



## NORTHERN BLADES NSC FIGURE SKATING CLUB 2020-21 CONSENT FOR MEDICAL ATTENTION OR TREATMENT

I certify that I, the member, or I, the parent/guardian of said participant, give my consent to the Northern Blades National Sports Center Figure Skating Club and the facility the activities are taking place in and their staff and to members of the Northern Blades National Sports Center Figure Skating Club, their Board of Directors and volunteers to obtain medical care from any licensed physician, hospital or clinic, including transportation and emergency medical services, for myself/ourselves and/or said participant for any injury that could arise from participation in these activities. This Consent for Medical Attention shall be binding and effective for the 2020-21 membership year of the Northern Blades National Sports Center Figure Skating Club.

### NORTHERN BLADES NSC FIGURE SKATING CLUB 2020-21 MEDIA RELEASE

Photos and videos may be taken during practice ice sessions, competitions, seminars, ice show practices, test sessions, exhibitions, social events, or group skating lessons and may be displayed on the NBNSCFSC website, bulletin board, NBNSCFSC Facebook page, brochures or in other NBNSCFSC materials or communications. On behalf of your skater, please indicate below your authorization to post photos or videos; photos and videos displayed will *NOT* contain individual skater identification (no skater names) in the captions without the prior and separate written approval of the skater and, when applicable, their parent or guardian. The Club does not control or regulate the taking of pictures, images, video, or names of Club members for purposes unrelated to Club publications and is not responsible for their use or distribution.

### NORTHERN BLADES NSC FIGURE SKATING CLUB 2020-21 CLUB DIRECTORY RELEASE

The Club Directory will be emailed to all Club members annually and updated periodically throughout the year. This directory and its contents are for the exclusive use of the membership of NBNSCFSC and should not in any case be used as a mailing list or database for commercial purposes. The Club directory will include member name, address (city/state/zip), phone number, email address and photo. Please indicate below your authorization to be included in the 2020-21 Club Directory. If you do NOT wish to be included in the directory, please send an email to membership@northernblades.org.

	I have read and agree to t above.	the Consent for Medical Attention or Tre	eatment as outlined			
I hereby give my permission for photos or videos of my skater/family to be dis NBNSCFSC.						
	I hereby give my permission to	o be included in the NBNSCFSC Club Direc	ctory.			
Р	rinted Name of Participant	Signature of Participant	Date			