**MISSOULA FIGURE SKATING CLUB**

APPLICATION FORM

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| **Contact Information** |
| Name: Click or tap here to enter text. Phone:Click or tap here to enter text.  Previous Names Used:Click or tap here to enter text. |
| Address:Click or tap here to enter text. |
| City:Click or tap here to enter text. State:Click or tap here to enter text. Zip:Click or tap here to enter text. Email:Click or tap here to enter text. |
| USFS#:Click or tap here to enter text. PSA#: Click or tap here to enter text. USA Hockey #:Click or tap here to enter text. |

# I am applying for (check those that apply):

Learn to Skate USA Instructor  Club Ice Coaching privileges Jump Belt Privileges Skating School Instructor Showcase On Ice Instructor  Off Ice Instructor  
Junior Coach  Name of Mentor/Sponsor Click or tap here to enter text.

# I have obtained (check those that apply):

MFSC (USFS) Membership PSA Membership (optional)   
Learn to Skate USA Membership Coaches Registration/Background Check Liability Insurance (USFS/PSA) (please attach)CER Category A CER Category B   
CER Category C

**Hockey Coaches only**: USA Hockey Membership CEP Level I  CEP Level II

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| **Highest tests passed** | **Year** | **Club/Location** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

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| **Coaching Experience (private/group)** | **Year(s)** | **Club/Rink** | **References** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

**Other Relevant Experience (e.g. other coaching/teaching experience):** Click or tap here to enter text.

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| **Professional Developments (PSA, USA Hockey CEP, or other Ratings Held, Conferences and Seminars Attended, etc.)** | **Date** |
| Click or tap here to enter text. | Click or tap here to enter text. |

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| **Students’ Qualifying Competitive Records**  **(List Highest Level of Students You Have Coached for 1 Year Minimum)** | | | |
| **Student** | **Competition** | **Inclusive Dates Coached** | **Placement** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

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| **Students’ Test Records**  **(List Highest Level of Students You Have Coached for 1 Year Minimum)** | | | |
| **Student** | **Highest test passed** | **Club** | **Date** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

**Professional Skating Experience (e.g. skating shows):** Click or tap here to enter text.

By signing below I certify that the information contain herein is true and correct, and that I am aware that any falsifications or misrepresentations may disqualify my application. I am also certifying that I have read and signed the Missoula Figure Skating Club’s (MFSC) Code of Conduct Policy and Coaches’ Policy.

Name:Click or tap here to enter text.

Signature:Click or tap here to enter text. DateClick or tap here to enter text.

*Mail form to:* **MFSC • PO Box 9195 • Missoula MT 59807**

**For Office Use Only:**

Date: Club Member: PSA Member Staff Initials Coaching Code of Conduct & Coaches’ Policy Form completed