

Starlight Ice Dance Club of the Twin Cities

July 1, 2025 – June 30, 2026 Membership Application

Personal Information

U.S Figure Skating Member Number (Not applicable to new USFS members):

* Skater Last Name	* Skater First Name
* Date of Birth (mm/dd/yyyy)	* Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male
	* U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No
* Address	Check here if new address: <input type="checkbox"/>
* City	* State
	* Zip Code
Primary Phone	Secondary Phone
Parent/Guardian Name (if skater under age 18)	
**Primary Email	**Secondary Email

* Item is required for membership by U.S. Figure Skating.

** Club communication is sent via email; check this box if you would rather receive communication via postal mail: ☐

Eligibility Status

☐ Eligible

☐ Ineligible (participated in unsanctioned activity)

☐ Restricted (by reason of employment)

Skating Motivation

(✓ Check all that apply)

☐ Competitive Skater

☐ Adult Skater

☐ Collegiate Skater

☐ Recreational Skater

☐ Coach

☐ Synchro Skater

☐ Parent/Guardian

☐ Club Officer/Board Member

☐ Other

☐ U.S. Figure Skating Officer/Official

Membership Type Annual dues are **not** prorated for a partial year membership; Change of home club transfers must pay full Starlight fee.

Home Club Member:

☐ **First Family Member** (good for 1 year; includes USFS dues and Skating Magazine) **\$135.00** _____

☐ **Additional Family Member** (related persons residing at the same address as a first family member. Good for 1 year, includes USFS dues.) **\$ 80.00** _____

☐ **Introductory Membership** (New to USFS, 1 year; includes USFS dues & Skating Magazine) **\$ 90.00** _____

☐ **Collegiate Member** (good for 4 years; includes USFS dues and Skating Magazine) **\$220.00** _____

Associate Member:

☐ **Associate Member** (good for 1 year of Starlight membership only) **\$ 40.00** _____

My Home Club for U.S. Figure Skating membership is: _____

(Full U.S. Figure Skating Club Name Please)

I hereby apply for membership in the Starlight Ice Dance Club of the Twin Cities (Starlight). I agree to comply with Starlight rules, as stated in the bylaws (available at www.starlighticedanceclub.com), when participating in any Starlight activities. I recognize Starlight has been formed to promote ice dancing. It is understood that Starlight will take reasonable means to provide a safe experience for its membership; however, it is further understood that ice skating is inherently dangerous and neither Starlight nor its officers or board members assume any financial responsibility for any accidents that may occur. I agree to the *SafeSport* statement on membership renewal and code of conduct included in this document.

Applicant Signature: _____ Date: _____

Parent/Guardian Signature if under 18

Return: ① This form

② Payment to **Starlight Ice Dance Club.**

③ Photocopy of College ID or similar (for Collegiate Membership only)

TO: Starlight Ice Dance Club
c/o Rita Goodman, Membership Chair
37 Greenway Gables
Minneapolis MN 55403