
MEMORANDUM FOR 2009-2010 SKATING SEASON

TO: SCNV MEMBERS
FROM: MEMBERSHIP CHAIR
SUBJECT: SCNV 2009 – 2010 SKATING SEASON
DATE: 5/21/09

On behalf of the SCNV Board of Directors, I would like to wish you a warm welcome as we begin to prepare for the 2009 – 2010 Skating Season! Benefits to joining SCNV include USFSA membership, which is required for testing and competing, testing priority at SCNV test sessions, the opportunity to subscribe to Club Ice Sessions, and voting privileges if you are 21 or over. **Club memberships are not transferable and not refundable. If you are planning to test, compete, or coach over the summer, it is imperative that you renew your membership by June 15, 2009.**

Please download, complete, and mail the membership forms along with the required fees in the enclosed envelope. Make checks payable to SCNV. To download the forms, go to www.scnv.org, click on “About Us”, and scroll down to membership. If you have any difficulties with obtaining the forms, please contact Lisa Okada, Membership Chair, at 703-323-9301 or lisa@scnv.org.

SCNV Membership Application. SCNV needs this information to register you with the club and with USFSA. The name given on the form will be the official name used by USFSA. **If SCNV will be your home club, membership dues for the 2009–2010 season are \$90.00 for the 1st family member and \$50.00 for each additional member.** If you have chosen another club to be your home club, then that organization will register you with USFSA. SCNV would be your secondary club. **Secondary club dues will be \$50.00 for the first family member and \$35.00 for each additional family member.** If your skater is a junior member under the age of 21 and you plan to contract for time on any of the club sessions that run from September to June, please remember that a parent must also join SCNV. Additional benefits to being a full skating member (those who contract for club ice) include being eligible for SCNV Achievement trophies and receiving test badges at no charge.

Code Of Conduct Form. All members must submit a Code of Conduct Form with their applications. This form must be signed and returned to the Membership Chair with the SCNV membership application. Coaches planning to teach on club ice sessions will receive a Coach Code of Conduct Form to fill out at a later date.

Medical Release Form (Skaters Only). If a Medical Release Form was not submitted last year or you have changes to your information, we recommend that you (particularly if you are under the age of 18) complete one this year and return it with your application. The forms are retained in the Club locker in case of an emergency.

Media Release Form. This gives permission to be photographed or videotaped by the skating club.

Volunteer Form. Volunteers are needed to assist with SCNV events. For more information, please contact Kathleen Lieb (703-865-5775).

SCNV is planning to offer prime ice time through its Club Ice Sessions on Monday evenings. An application form will be mailed to you later this summer.

We wish you a very enjoyable and successful 2009-2010 Skating Season.

Lisa Okada

Membership Chair

SKATING CLUB OF NORTHERN VIRGINIA

2009-2010 MEMBERSHIP APPLICATION

Date: _____

If you plan to test, compete or coach over the summer, your application must be received by June 15, 2009. A parent is required to join if the skater plans to subscribe to any Monday Night Club Ice sessions.

	NAME	USFSA / ISI LEVEL	DOB	USFSA#	DUES
1 st Family Member					\$90.00*
2 nd Family Member					\$50.00
3 rd Family Member					\$50.00
4 th Family Member					\$50.00

IF SCNV WILL BE YOUR SECONDARY CLUB, DUES WILL BE \$50.00 FOR FIRST FAMILY MEMBER AND \$35.00 FOR EACH ADDITIONAL FAMILY MEMBER (please cross out prices and make correction in above boxes)

*Interim Membership (After 3/31/10) - \$ 60.00 - 1st; \$35.00 each additional / Secondary Club Members \$20.00

TOTAL _____

SCNV MEMBERSHIP IS NON-TRANSFERABLE AND NON-REFUNDABLE

HOME ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ WORK PHONE: _____ CELL: _____

EMAIL ADDRESS: _____

Check here to exclude your phone number from the SCNV Membership Directory

Circle appropriate family member number for the following questions :

(1) (2) (3) (4) I will graduate from high school in 2010

(1) (2) (3) (4) I am transferring from another club. Name/Address present club: _____

(1) (2) (3) (4) I have been a prior SCNV club member, but not a member last year. _____

Check yes or no for each family member:

U.S. Citizen: (1) YES ___ NO ___ If no, what country? _____

U.S. Citizen: (2) YES ___ NO ___ If no, what country? _____

U.S. Citizen: (3) YES ___ NO ___ if no, what country? _____

U.S. Citizen: (4) YES ___ NO ___ If no, what country? _____

Do you want your 2009-10 USFSA Registration through SCNV? (SCNV WOULD BE YOUR HOME CLUB)

(1) YES ___ NO ___ If no, which club _____

(2) YES ___ NO ___ If no, which club _____

(3) YES ___ NO ___ If no, which club _____

(4) YES ___ NO ___ If no, which club _____

Release:

The Skating Club of Northern Virginia, its Officers and Directors undertake no responsibility for damages or injuries suffered by a skater on a Club Skating Session, Test Session, or during a Club Activity. As a condition of and in consideration of acceptance of membership, I/we (if under 18, their parents and/or guardian) agree to assume all risks of injury to my/our person and property, and therefore waive and release any and all claims against the Skating Club of Northern Virginia, its Officers and Directors.

Signature of Parent or Guardian if skater is under 18

Signature of Member

Please make checks payable to SCNV and mail application and fees to:

**SCNV Membership
Lisa Okada
7900 Wild Orchid Way
Fairfax Station, VA 22039**

Reminder: Please return application prior to June 30, 2009.

SKATING CLUB OF NORTHERN VIRGINIA

Code of Conduct

This Code of Conduct is intended to address the increasing trends in youth sports whereby both parents and members are letting their emotions manifest themselves in abusive and sometimes physical violence. The Skating Club of Northern Virginia supports a zero tolerance policy for unsportsmanlike behavior. Its members, coaches, and parents (if member is under 18 years old) should continually raise the standard of behavior both on and off the ice.

Membership in the Skating Club of Northern Virginia is a privilege and should carry a sense of pride. Participation in programs offered will require that members and parents of members under 18 years of age accept certain responsibilities.

MEMBERS' RESPONSIBILITIES:

Members will not verbally or physically abuse any of their fellow Skating Club of Northern Virginia members. This also includes any U.S. Figure Skating Officials, U.S. Figure Skating members, board members, volunteers, or coaches. Members understand that poor sportsmanship, on or off the ice, will not be tolerated.

PARENTS/GUARDIAN RESPONSIBILITIES:

Parents and guardians will not verbally or physically abuse Skating Club of Northern Virginia members. This also includes any U.S. Figure Skating Officials, U.S. Figure Skating members, board members, volunteers, or coaches. Parents understand that poor sportsmanship, on or off the ice, will not be tolerated.

Parents/guardians will –

- Encourage good sportsmanship by demonstrating support for all skaters, coaches, board members, and officials during all on and off ice sessions, practices, competitions and other skating or club related events.
- Place the emotional and physical well being of their child and other skaters ahead of any personal desire to win.
- Insist that their child skate in a safe and healthy environment.
- Treat skaters (including their own child), parents, coaches, board members, volunteers, fans and officials with respect and refrain from verbal indignities and physical abuse.
- Not engage in sexual harassment or sexual misconduct with any skaters, coaches, board members and officials at all practices, competitions and other skating or club related events.
- Not discriminate against any skaters, coaches, board members and officials at all practices, competitions, and other skating or club related events.
- Not encourage any behaviors or practices that would endanger the health and well being of skaters.
- Refrain from coaching their child or "manipulating" other members during any on and off ice sessions.
- Teach their child to play by the rules and to resolve conflicts with civility and without resorting to hostility.
- Support coaches and officials working with their child to provide a positive, enjoyable experience for all, keeping in mind that skating is for the skaters.
- Respect the coaches and officials and their authority during events and not question, discuss or confront coaches at the site.
- Take time to speak with the coach at an agreed upon time and place if there are issues or concerns to discuss.
- Demand a drug, tobacco and alcohol-free sports environment for their child and refrain from using these substances at all events.
- Comply with all applicable Anti-Doping Rules including, but not limited to, ISU Anti-Doping Rules.

COURSE OF ACTION:

Should a parent or member not adhere to the above standards, the Skating Club of Northern Virginia Board of Directors holds the member and/or parent accountable and the Board of Directors is empowered to take necessary action. Actions could be as simple as a verbal warning to the parent or member or disciplinary hearings before the Board of Directors leading to suspension or expulsion from the Skating Club of Northern Virginia.

IMPLEMENTATION:

The discipline process procedure is on file with the Skating Club of Northern Virginia. Anyone may file a written complaint and send it to an officer of Skating Club of Northern Virginia.

I understand and will comply with the Skating Club of Northern Virginia Code of Conduct.

Member signature Date

Print name

Parent/guardian signature Date
(if member under 18)

Print name

**Skating Club of Northern Virginia
Medical/Emergency Treatment Release**

I, _____ hereby authorize any physician and/or any member of the medical staff of any hospital or emergency treatment center to render medical treatment, which is his/her judgment may be deemed necessary in the care of:

Skater's Name: _____ Birth Date: _____

Address: _____

Home Phone #: _____ Mother's Work #: _____

Cell Phone/Pager: _____ Father's Work #: _____

Please give us the names of two responsible persons to call if you cannot be reached in an emergency:

Name: _____ Home #: _____ Work #: _____

Name: _____ Home #: _____ Work #: _____

Skater Information: Doctor's Name: _____

Address: _____

Phone #: _____

Allergies: _____ Insurance Co: _____

_____ Address: _____

Past Medical History: _____ Policy #: _____

_____ Name of Subscriber: _____

Currently on any medication: _____

Parent/Guardian Signature: _____ Date: _____

Skating Club of Northern Virginia

Media Release

2009 – 2010 Season

I, _____ hereby give my permission for _____ (my son/daughter/self) to be photographed or videotaped by designated members of The Skating Club of Northern Virginia. I understand that these photos or videos will be used for the sole purpose of promoting club functions such as the annual banquet, club advertisements in competition programs, or information on the web site.

Parent/Guardian Signature: _____ Date: _____

Dear Parent or Adult Member,

Our club is responsible for many events during the year, which require many hours of volunteer work to be successful. Most people find it interesting and fun to get involved in the club. You meet many people and learn a great deal about the “behind the scenes” of the sport. If you feel you might be able to help in some areas, please indicate below (feel free to write in any area not included). Please be assured that enthusiasm is the key requirement, not prior experience!

___ HOSPITALITY: I can help organize or work meals for Judge’s hospitality at our test sessions

___ PROGRAMS: I can help with program layout and design logos for special events

___ WEBSITE: I can help with the SCNV website

___ NEWSLETTER: I can help with the e-newsletter

___ FOOD CONTRIBUTION: I can bring food to SCNV special events

___ SOUTH ATLANTIC SEND OFF: I can help with the send off

___ HOLIDAY PARTY: I can help with the holiday party

___ ANNUAL AWARDS EVENT: I can help with the event.

___ BOARD MEMBER: I would like to be considered for a position on the SCNV Board of Directors.

___ MEMBERSHIP COMMITTEE: I would like to be on this committee.

___ SESSIONS COMMITTEE: I would like to be on this committee.

OTHER: _____

NAME : _____

PHONE: _____

EMAIL: _____

OCCUPATION: _____

SPECIAL SKILLS: _____

THANK YOU

ATTENTION

COLLEGE STUDENTS!

STARTING WITH THE 2009-2010 SKATING YEAR
US FIGURE SKATING IS OFFERING A NEW 4 YEAR U.S. FIGURE
SKATING COLLEGIATE MEMBERSHIP PACKAGE

**This reduced rate membership will be available
June 1, 2009**

All those members beginning college this fall or those who are already in college are eligible.

If you are an SCNV member and intend to continue your SCNV membership, or if you were a member in previous years and would like to join again, this plan may be for you!!

Once you register, USFSA will send you information about coaching, becoming an official, and collegiate skating opportunities.

**For more information, contact Lisa Okada, SCNV
Membership Chair:**

lisa@scnv.org

703-323-9301