

International Skating Club of Raynham
Application to Coach on Club Sessions

Professional's Name _____ USFSA# _____
Address _____
City _____ State _____ Zip _____
Home Phone _____ Cell Phone _____ Fax _____
*Email _____
USFSA Home Club _____

Highest USFSA test passed and/or PSA active ratings:

Freestyle	MIF
Dance	Synchro
Figure	Group
Pairs	Others

In making this application:

- ❖ I agree to abide by all regulations of the International Skating Club of Raynham and the CDL Arena.
- ❖ I understand that teaching on International Skating Club sessions is a privilege granted by the Board of Directors of the International Skating Club and may be restricted or revoked for failure to comply with the applicable regulations.
- ❖ I agree to keep my professional liability insurance current and to provide proof of continued coverage upon expiration of the current certificate.
- ❖ I certify that I am in compliance with all International Skating Club coaching requirements.

Signature

Date

The following materials must be submitted with this application:

- Resume
- Proof of professional liability insurance
- Two references (names, contact information)
- Proof of current USFSA membership (Not required for ISC home club members)
- International Skating Club membership application
- **Dues Check of \$100 or agreement to teach 4 Learn to Skate Classes. You must notify the board of this choice.(Check will not be cashed until your application has been approved; it will be returned to you in the event that your application has been denied for any reason).**

Send Application and all requirements to:

Debbie Coraine
445 Liberty Street
Braintree, MA 02184