MIDLAND SPEED SKATING CLUB

YEAR 20__ / 20__ PERSONAL DATA FORM

PLEASE PRINT

PARENT/GUARDIAN NAME(S) **PHONE NUMBERS**

_____/ _____

_____/ _____

_____/ _____

_____/ _____

SKATER'S NAME(S)

_____(AGE) _____

_____(AGE) _____

_____(AGE) _____

_____(AGE) _____

_____(AGE) _____

MAILING ADDRESS 1

_____

(CITY)_____**(ZIP)**_____

MAILING ADDRESS 2 (IF APPLIES)

_____

(CITY)_____**(ZIP)**_____

EMAIL ADDRESS 1 _____

EMAIL ADDRESS 2 _____

(IF APPLIES)

PUBLIC INFORMATION RELEASE:

I give my parental persmission for club representatives to take and reproduce photographs of my skaters and/or family members for publicity via print, video, or web production; and to use personal information such as name, age, speed, etc. in said publications.

YES_____ **NO**_____ **DATE**_____

PARENT/GUARDIAN SIGNATURE

_____

Mail to: Julie Dukes, 3801 Woodside Drive, Midland, MI 48640

TREASURER'S COPY

PERSONAL & CONFIDENTIAL DATA FORM ____ **SPEED SKATING CLUB**

COMMENTS: _____

FAMILY LAST NAME _____/ NAME OF CONTACT PERSON _____ PHONE ___-___-____

TODAY'S DATE __/__/__

SKATER'S NAME	START FREE MO. END FREE MO.	RENTAL FEES	PRORATED ICE FEES	OTHER CHARGES	TOTAL DUE	PAID	AMOUNT DUE	NOTES
	-							
	-							
	-							
	-							
	-							
	-							
	-							
	-							