



Helper/Apprentice/Basic Skills Coach Application

Position applying for (please check one): Helper Apprentice Basic Skills Coach

Name: _____ Phone #: _____

Birthdate: _____ Grade entering in fall: _____

Email address most often used: _____

USFSA #: _____

MSLFSC Membership: Full Club Member Associate Member

Highest Basic Skill Level Passed: _____

Highest USFSA Level(s) Passed: Moves in the Field: _____

Free Skate: _____

Dance: _____

Other: _____

Figure skating camp(s)/seminar(s) attended within the past two (2) years:

| Club Name/Seminar | Location | Date (mm/yy) | Length of camp/seminar |
|-------------------|----------|--------------|------------------------|
| | | | |
| | | | |
| | | | |

Name of coach(es) and location of any private lesson(s) taken:

What MSLFSC sponsored event(s) have you participated in? List event and frequency (i.e., parades, fundraisers such as Skate to Donate, Feed My Starving Children, Dine to Donate, wreath sales, or helping with show decorations, other):

| | |
|--|--|
| | |
| | |
| | |
| | |



Personal figure skating goal(s) *(check all that apply)*

- Coach basic skills in college
- Participate on a collegiate figure skating team
- Travel with a professional ice show
- Just have fun
- Compete in local competitions
- Pass certain USFSA tests
- Participate on a high school figure skating team
- Other *(please list)* _____

Tell us why you would like to become a helper, apprentice or basic skills coach:

| | |
|--|--|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

If selected, when are you available *(check all that apply)*:

- Weekly
- Every Other Week
- Session 1
- Session 2
- Both Sessions

Signature of Applicant

Date

Signature of Parent/Guardian

Date

Please submit completed application **by August 1, 2018:**
-by mail: Marshfield Silver Laces Figure Skating Club
PO Box 222, Marshfield, WI 54449



-by email to: Mary Christensen at sk8clubpresident@gmail.com