

COACHING INFORMATION SHEET
FOR
Merrill Ice Reflections Figure Skating Club
October _____ through March _____

All coaches who are granted permission to coach Figure Skating for any Merrill Ice Reflections Figure Skating Club program must complete the information sheet PRIOR TO BEING PERMITTED TO COACH. This form is NOT intended to be an employee-employer agreement. It is understood that many different contractual arrangements may exist between coach and the arena, USFS Member Club and Figure Skating students.

1. GENERAL INFORMATION

Name _____

Address _____

City, State, Zip _____

USFS # _____ Phone # _____

E-mail _____ Cell # _____

Citizenship _____

2. Please check which position you will be working under for MIRFSC.
 Junior Coach Professional Coach

3. REQUIREMENTS

i. RESUME

Must have a CURRENT resume on file. Please submit every 2 years

____ I submitted a resume last year

____ Attached is a current resume

ii. INSURANCE

Do you have professional liability insurance in force with minimum coverage of \$1,000,000?

Yes _____ No _____

If yes, through what company? _____

What are the limits of coverage? _____

PLEASE ATTACH A COPY OF YOUR CERTIFICATE OF INSURANCE.

IF NO, IT IS UNDERSTOOD THAT PROFESSIONAL LIABILITY INSURANCE MUST BE OBTAINED AND IN FORCE PRIOR TO ANY COACHING ACTIVITY.

iii. OTHER

Please provide proof of USFS membership, Learn to Skate Instructor certification and completion of CER.

If 18 or older, please provide proof of completion of a background check.

4. Please list rinks/clubs with dates of coaching affiliation at the last three rinks/clubs you coached at:

Name and Address of Organization

Contact person, phone number and Dates of Affiliation

1. _____

2. _____

3. _____

5. FIGURE SKATING BACKGROUND

Personal Highest Test Passed

Freestyle	Moves	Dance
<input type="checkbox"/> Pre-Preliminary	<input type="checkbox"/> Pre-Preliminary	<input type="checkbox"/> Preliminary
<input type="checkbox"/> Preliminary	<input type="checkbox"/> Preliminary	<input type="checkbox"/> Pre-Bronze
<input type="checkbox"/> Pre-Juvenile	<input type="checkbox"/> Pre-Juvenile	<input type="checkbox"/> Bronze
<input type="checkbox"/> Juvenile	<input type="checkbox"/> Juvenile	<input type="checkbox"/> Pre-Silver
<input type="checkbox"/> Intermediate	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Silver
<input type="checkbox"/> Novice	<input type="checkbox"/> Novice	<input type="checkbox"/> Pre-Gold
<input type="checkbox"/> Junior	<input type="checkbox"/> Junior	<input type="checkbox"/> Gold
<input type="checkbox"/> Senior	<input type="checkbox"/> Senior	<input type="checkbox"/> International

List any other tests passed (i.e. pair, synchro, etc) _____

Name tested under _____
 (If different than above)

Figure Skating Accomplishments: (Competitions, Shows, Awards, etc.)

Highest PSA Ratings:
 Figure/Freestyle _____ Choreography/Style _____
 Synchronized _____ Dance _____
 Pairs _____ Group _____

THE INDEPENDENT CONTRACTOR IS NOT ENTITLED TO WORKERS' COMPENSATION BENEFITS AND THE INDEPENDENT CONTRACTOR IS OBLIGATED TO PAY FEDERAL AND STATE INCOME TAXES ON ANY MONIES EARNED PURSANT TO THE CONTRACT RELATIONSHIP.

I certify that all information provided is true and accurate and has been provided to the best of my ability. Merrill Ice Reflections Figure Skating Club retains the right terminate any and all agreements at any time with or without cause. By signing this document, I agree to a polygraph test and/or drug test if requested and understand that a background check may be conducted.

Signature

Date

Printed Name

Mail completed and signed forms to:
MIRFSC Personnel Chair
PO Box 44
Merrill, WI 54452

AUTHORITY TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

I hereby authorize any authorized representative of the Merrill Ice Reflections Figure Skating Club bearing this release, or copy thereof, within one year of its date, to obtain any information in your files pertaining to my personal and figure skating records (including any grievance records), employment, military, educational records (including, but not limited to, academic, achievement, attendance, athletic, personal history and disciplinary records), and law enforcement records (including, but not limited to, any record of charge, prosecution or conviction for criminal or civil offenses). I hereby direct you to release such information upon request to the bearer. This release is executed with full knowledge and understanding that the information is for the official use of the Merrill Ice Reflections Figure Skating Club. Consent is granted for the Merrill Ice Reflections Figure Skating Club to furnish such information, as is described above, to third parties in the course of fulfilling its official responsibilities. I hereby release you, as the custodian of such records, and any school, college, university, or other educational institution, law enforcement agency, or criminal justice agency, including its officers, employees or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with authorization and request to release information, or any attempt to comply with it. I am furnishing my Social Security Account Number on a voluntary basis with the understanding such is not required by Federal statute or regulation. I have been advised the Merrill Ice Reflections Figure Skating Club will utilize this number only to facilitate the location of employment, military and educational records concerning me in connection with this application. Should there be any question as to the validity of this release, you may contact me as indicated below.

Full name _____
(Signature)
(Include maiden name & any other previously used names)

Full name _____
(Typed or printed)
(Include maiden name & any other previously used names)

Parent or Guardian: _____
(If required)

Date: _____

Current address: _____

Telephone #: _____
Cell #: _____

Home Club: _____
USFS #: _____
PSA #: _____