



National Governing Body for Roller Sports

USA Roller Sports
4730 South Street
Lincoln, NE 68506
402.483.7551 phone 402.483.1465 fax

2019-2020 CLUB CHARTER REGISTRATION AND VERIFICATION OF OFFICERS *Important...*

Please be aware that individual memberships will not be processed for members affiliated with this club until charter is complete!

PLEASE PRINT CLEARLY – USE FULL LEGAL NAMES, NOT NICKNAMES

Has this location ever had a chartered USARS club? Yes No Club Id #: _____

Type of Club: Check **only one** subcategory under each sport. Additional subcategories must be chartered on a separate form.

- | | | | | |
|--|--|---|--|---|
| <u>Figure \$90</u>
<input type="checkbox"/> all types | <u>Hockey \$90</u>
Rink
<input type="checkbox"/> select
<input type="checkbox"/> house (no fee)
Inline
<input type="checkbox"/> select
<input type="checkbox"/> house (no fee) | <u>Roller Derby (Flat or Banked)</u>
<input type="checkbox"/> women, men, co-ed \$300
<input type="checkbox"/> junior \$100 | <u>Speed \$90</u>
<input type="checkbox"/> inline
<input type="checkbox"/> quad
<input type="checkbox"/> both | <u>Additional Sports \$90</u>
freestyle
<input type="checkbox"/> fitness
<input type="checkbox"/> jam
<input type="checkbox"/> extreme inline |
|--|--|---|--|---|

Club Name: _____

Premises where club activities will take place:

Facility Name: _____

Address/City/State/Zip: _____

Phone: _____ Fax: _____ Size of Skating Surface: ___ x ___ feet. Type of Surface: _____

Club Mailing Address (only if different from address above):

Club Contact: _____

Address/City/State/Zip: _____

Phone: _____ Fax: _____ Cell: _____ Email: _____

Club Officers (we request that 2 separate people sign as club officers (but only 1 is required) and they must be a current 2019-20

USARS members; if they are not current members their individual registrations must be submitted with this charter application):

President: _____ Email Address: _____

Signature: _____

Check all that apply: Competitor this season Non Competitive USARS Coach

Secretary/Treasurer: _____ Email Address: _____

Signature: _____

Check all that apply: Competitor this season Non Competitive USARS Coach

Additional Club Officers authorized to sign transfer releases (MUST BE USARS MEMBERS).

Print Name: _____ Email Address: _____

Signature: _____ Title: _____

Print Name: _____ Email Address: _____

Signature: _____ Title: _____

Print Name: _____ Email Address: _____

Signature: _____ Title: _____

All officers and persons authorized to sign club releases must hold a current (2019-2020) membership with USARS. A club charter and all associated memberships will not be sent until all officers and persons authorized to sign club releases have been registered with USARS. To be entitled to full voting privileges, a USARS club must have a minimum of five (5) active members, and no club may be registered without a minimum of 1 officers: President and Secretary/Treasurer. Applicants will be notified if their application is incomplete. The incomplete application will be held for 60 days after which it will be returned and skaters so notified that they are free to re-affiliate with another club.

AGREEMENT

The undersigned representatives of the club organization hereby make application for Club Membership under sponsorship of USA Roller Sports (USARS) and do certify that all club members shall be individually bona fide members of USARS, and if accepted, agree to observe, uphold, and respect the By-Laws, Rules and Regulations of this Confederation as they affect amateur competitive roller sports. The undersigned club officers agree to indemnify and hold USARS harmless from any and all damages or liability which may be asserted against USARS as a result of the undersigned club officers' failure to so observe and enforce said By-Laws, Rules and Regulations of this Confederation as they affect competitive roller sports, or as a result of the undersigned club officers' negligence, or as a result of any other fault on the undersigned club officers' behalf. The undersigned club officers further agree that they have no express or implied authority to bind, obligate or hold themselves out as agents of USARS. The undersigned club officers further agree that all sanction fees will be promptly turned over to USARS Headquarters according to the terms of the sanction. The undersigned club officers also agree to submit a copy of all club minutes and the Club Constitution to USARS Headquarters.

A copy of any contracts and/or leases with facilities must be included with this application

By signing below, the undersigned acknowledges that they have had an opportunity to review the insurance policy in place for all USARS members and clubs, understands the contents and limitations contained therein, and have had an opportunity to ask any questions regarding said insurance policy.

PLEASE SIGN BELOW

Club President Signature: _____ Date: _____

Secretary/Treasurer Signature: _____ Date: _____

The undersigned facility owner/operator hereby agrees to allow the host club to use the facility as their chartered facility.

Print Owner/Operator Name: _____ Email: _____

Owner/Operator Signature: _____ Date: _____

Please only use **ONE** of the methods below. Duplicate returns may result in duplicate charges and delayed processing.

MAIL completed form and check or credit card information to: USA Roller Sports, 4730 South Street, Lincoln, NE 68506

FAX completed form and credit card information to: 402.483.1465

EMAIL completed form and credit card information to: tbrendle@usarollersports.org

CREDIT CARD INFORMATION

Card Number: _____ CCV#: _____

Expiration Date: _____ Billing Zip Code: _____

Name on Card: _____

Signature: _____

Total Amount To Charge: _____

Please make a photocopy of this completed form for your club's future reference.