

# CFSC Older Skater Volunteer Participation Form

**Skater Name**

**Grade (must be 7th grade or above)**



**Address**

**City/State**

**Zip**




**Telephone (Home)**

**(Cell)**

**email**




**Parent/Guardian Name**

**Address**

**City/State**

**Zip**




**Telephone (Home)**

**(Cell)**



**Vision/Purpose/Goal:**

The older skater vision/purpose shall follow the CFSC vision and bylaws with the additional purpose of serving the needs of the club while developing leadership skills; and sharing both skating and life skills with our younger skaters. The goal of this group is to develop comradery between our skaters and, through a variety of activities, create a depth of mentor and mentee connections within our club.

Skater-led opportunities will include seminars, social activities, team building activities, and serving other needs of the club.

**Contacts:**

Please direct questions to adult committee members Jackie Jiran, Jenn Gizinski or Kara Wischnack either in person or through the club email address [chaskafigureskatingclub@gmail.com](mailto:chaskafigureskatingclub@gmail.com)

**Agreement:**

I  agree to follow the vision/purpose/goal of the CFSC mentor program. I will attend a one-time mentor training and follow the procedures and tips for signing up for volunteer hours and working with younger skaters. I will bring any questions or concerns to the committee contacts in order to ensure participant safety and quality of activities.

Skater Name

**Special Skills:** (list any special skills you would consider sharing with younger skaters. Examples include skate care, music, crafting, self-care, health and wellness, hair and make-up, academics, and others.)

**Skater Name**

**Date**



**Parent/Guardian Name**

**Date**