



# ACT ICE SKATING ASSOCIATION

PO Box 76, WODEN ACT 2606

## MEMBERSHIP FORM 2024

One Form Per Person - members will be emailed renewal details

This form must be completed by all individuals applying to ACTISA for membership.  
Please refer to the *ACTISA Membership Policy Document* for full membership information.

### APPLICANT DETAILS

Name: .....

Address: .....

Suburb: ..... Post Code: .....

Email Address: .....

Phone No: ..... Date of Birth: .....

### MEMBER CATEGORY (1 Jan 2024 to 30 Dec 2024 membership year)

Select Renewal Period below	Non-voting members		Voting members			
	Theatre on Ice – Junior (ToI ONLY events)	Junior Skater (under 18 years of age)	Associate Member (allows skating in non-competitive events only)	Theatre on Ice – Adult (ToI ONLY events)	Adult (18 years & over, no open competition, Prelim to Senior)	Senior Skater (18 years or over)
New Members Jan – Mar <b>AND</b> Renewing Non Aussie Skate	\$45					
Renewing Aussie Skate	\$25					
New Members only Apr – Jun	\$40					
New Members only Jul – Sep	\$35					
New Members only Oct – Dec <sup>†</sup>	\$45 (†Bonus 15 Months Membership)					

**ALL FEES INCLUDE LEVIES TO COVER ICE SKATING AUSTRALIA NATIONAL REGISTRATION**

**Optional Skater photography and filming permission form:** I give permission for any photograph/s and/or films taken under ACTISA's direction, at ACTISA events, by a designated photographer/video operator plus any film footage provided from different sources (under ACTISA's direction) to be used by an ACTISA committee official to formulate information for distribution to the media, for placement onto the ACTISA official website and/or for use in any promotional material directly relating to ACTISA and/or ice skating in the ACT. Please note: the skater's name will be used for most media articles and some placements on ACTISA's official website.

Do you **AGREE** to allow photography and filming as set out above? **YES / NO**

Do you wish to **Opt Out** from receiving routine (not regular) emails from ACTISA about forthcoming competitions and events etc? Does not include statutory notices: **YES / NO**

**Mandatory:** I agree to abide by the Constitution and Policies & Procedures of ACTISA Inc (copies available from the Membership Secretary or at [www.actisa.asn.au](http://www.actisa.asn.au)).

Name ..... Signature ..... Date.....  
(Please print Parent/Guardian Name) Parent/Guardian (if under 18 yrs)

Direct Deposits to St George Bank, Account: ACT Ice Skating Association Inc - BSB 112-908 Account Number 482 330 765.  
If using direct deposit, please indicate member name (or number) in the comments field - include direct deposit receipt with form.  
Membership forms can be left in the ACTISA drawer at the Rink (no cash in drawer please) or posted to the address above.

OFFICE USE ONLY:		Total Received	ACTISA Member No
Amount Received:	\$		
Receipt No:		Receipt Date: / / 2024	