



**Flagstaff Figure Skating Club  
Coaching Agreement**

All persons seeking admittance to the Flagstaff Figure Skating Club (FFSC) as a coach must submit this complete packet to the Vice President for approval by the FFSC Board of Directors initially and then annually before the June Board Meeting date.

**General Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Drivers License #: \_\_\_\_\_

**Insurance:**

Coaches **must** carry individual liability insurance with a minimum limit of liability of \$1,000,000 and must list the Flagstaff Figure Skating Club as an additional insured.

Name of Insurance Company: \_\_\_\_\_

Policy Effective Date: \_\_\_\_\_ Policy Expiration Date: \_\_\_\_\_

**PLEASE ATTACH A COPY OF YOUR CERTIFICATE OF INSURANCE TO THIS FORM.**

**Background Information:**

Have you ever been convicted of a felony? \_\_\_\_\_

If yes, please explain the circumstances:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Crime: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_



Please list references from prior coaching/teaching experiences (names, addresses and dates):

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE ATTACH A PROFESSIONAL SKATING RESUME.**

**I certify that all information provided is true and accurate. I understand that a background check may be conducted by FFSC:**

\_\_\_\_\_  
Printed Name of Coach                      Signature of Coach                      Date

\_\_\_\_\_  
Date of Board Approval                      Signature of Officer



## Flagstaff Figure Skating Club Coaching Agreement

I, the undersigned, fully understand and agree to abide by the following:

1. I will be a member in good standing of FFSC, U.S. Figure Skating Association (USFSA), and the Professional Skaters' Association (PSA).
2. I will abide by the FFSC Code of Conduct including SafeSport, the USFSA Code of Conduct and the PSA Code of Ethics.
3. I will carry liability insurance and provide proof of coverage to FFSC.
4. I will actively pursue greater knowledge of the sport of figure skating.
5. I will not solicit or teach another student without the permission and full knowledge of their coach.
6. I will pay all fees owed to FFSC.
7. I will encourage goodwill and ethical behavior among all skaters, parents, other coaches, and rink personnel.
8. I will participate in and support FFSC activities.
9. I will dress and behave in a professional manner at all times.

***FFSC will provide free club ice to all approved coaches that teach at least 3 hours per week. Note this is a benefit provided to coaches only, and does not extend to friends or family.***

***Agreements, contracts, fees for services, and disputes between coaches and skaters do not involve and are not the responsibility of FFSC. I hereby release, discharge, covenant not to sue, and hold harmless the Flagstaff Figure Skating Club (FFSC), its respective administrators, directors, agents, officers, and volunteers from all liability, claims, demands, losses, or damages arising out of agreements or contracts between myself and the FFSC Board of Directors.***

### Signatures:

\_\_\_\_\_  
Printed Name of Coach

\_\_\_\_\_  
Signature of Coach

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Club Officer

\_\_\_\_\_  
Signature of Officer

\_\_\_\_\_  
Date