

Thomas Creek Figure Skating Club Test Session Application

Date: Saturday, May 4th, 2019 (11am-6pm)

Deadline: April 8th, 2019

Location: 80 Lyndon Rd. Fairport, NY 14450

Name:	Home Club:	USFSA #:
Address:	Phone:	(required)
City, State, Zip:	Email:	

Please circle the Level, Fee and Dance code for EACH test you wish to take.

Moves in the Field			Free Skate Singles/Pairs			Dances								
Level	TCFSC Members	Non TCFSC	Level	TCFSC Members	Non TCFSC	Level					TCFSC Members	Non TCFSC		
Pre preliminary	\$25	\$35	Pre Preliminary	\$25	\$35	Preliminary	DW	CT	RB	-	-	\$20	\$30	
Preliminary	\$30	\$38	Preliminary	\$30	\$38	Pre Bronze	SD	CC	FIT	-	-	\$25	\$33	
Pre Juvenile	\$33	\$42	Pre Juvenile	\$33	\$42	Bronze	HH	WIW	TF	-	-	\$28	\$38	
Juvenile	\$35	\$45	Juvenile	\$35	\$45	Pre Silver	14S	EW	FT	-	-	\$30	\$40	
Intermediate	\$40	\$48	Intermediate	\$40	\$48	Silver	AW	T	RF	-	-	\$35	\$48	
Novice	\$45	\$53	Novice	\$45	\$53	Pre Gold	K	BL	PD	SW	-	\$40	\$51	
Junior	\$50	\$58	Junior	\$50	\$58	Gold	VW	WW	QS	AT	-	\$55	\$66	
Senior	\$55	\$63	Senior	\$55	\$63	International	AUS	CON	F	GW	MB	\$55	\$68	
Adult Pre Bronze	\$30	\$38	Adult Pre Bronze	\$30	\$38		RW	R	SAM	TR	YP			
Adult Bronze	\$35	\$43	Adult Bronze	\$35	\$43	Circle if applicable:								
Adult Silver	\$40	\$48	Adult Silver	\$40	\$48	Standard (through pre-silver only)					Solo (all levels)		Adult	
Adult Gold	\$45	\$53	Adult Gold	\$45	\$53	Does this complete a dance level?					yes	no		

Test Fee Summary	TCFSC Members	Non TCFSC
Moves Total	\$	\$
Free Skate Singles/ Pairs Total	\$	\$
Dance Total	\$	\$
Registration Fee	\$15.00	\$25.00
*Late Fee \$25 (postmarked after April 8th)		
Total Enclosed	\$	\$

The USFSA and its member clubs conducting tests undertake no responsibility for damages or injuries suffered by the candidates. As a condition of and in consideration of the acceptance of their applications, all candidates and their parents and/or guardians shall be deemed to have agreed to assume all risks of injury to the candidates person and property resulting from, caused by or connected with the conduct and management of the tests, and to release any and all claims which they may have against any official, the USFSA, the club hosting the tests and against their officers. Applications shall be accepted only on the foregoing conditions.

Parent or Skater's Signature: _____ Date: _____
(Parent if the skater is under 18)

Permission is required from the skater's home club in order to submit this application: The above named skater is a member of good standing in her/his home club, has met all USFSA requirements and has permission to test at this test session.

Home Club Officer Signature: _____ Date: _____

- TCFSC Home Club members have test priority as long as the form and payment are received prior to the deadline. Applications from non-club members will be accepted on the basis of available ice time and judges.
- Only fully completed applications (including all signatures and fees) will be accepted. Late applications will not be accepted without the appropriate fees.
- NO REFUNDS.

Mail completed forms to:
Beth Glaza, TCFSC Test Chair
52 Fox Hill Drive
Fairport, NY 14450
Make checks payable to: TCFSC
Questions: Contact Beth Glaza at bglaza@rochester.rr.com