

Thomas Creek Figure Skating Club

Test Application

Test Date: Saturday, November 11, 2017 **Time:** 2:00 pm – 8:00 pm **Postmark Deadline:** October 28, 2017

NAME: _____ USFSA #: _____

ADDRESS: _____ EMAIL: _____

HOME CLUB: _____

PHONE: _____

Coach signatures for test session:

Coach/Moves: _____

Coach/Freestyle: _____

Coach/Dance: _____

***Coach Email:** _____

Circle the name of each test that you are taking and the appropriate fees

Moves	TCFSC	Non		Freestyle	TCFSC	Non		Dances (fee is per dance)					TCFSC	Non
	member	TCFSC		member	TCFSC	member		TCFSC						member
PrePre	\$25	\$35		PrePre	\$25	\$35		Prelim	DW	CT	RB		\$20	\$30
Prelim	\$30	\$38		Prelim	\$30	\$38		PreBrz	SD	CC	FIT		\$25	\$33
PreJuv	\$33	\$42		PreJuv	\$33	\$42		Bronze	HH	WIW	TF		\$28	\$38
Juv	\$35	\$45		Juv	\$35	\$45		PreSil	14S	EW	FT		\$30	\$40
Inter	\$40	\$48		Inter	\$40	\$48		Silver	AW	T	RF		\$35	\$48
Novice	\$45	\$53		Novice	\$45	\$53		PreGld	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		Int'l.					\$55	\$68
Adult PB	\$30	\$38		Adult PB	\$30	\$38								
Adult Bron.	\$35	\$43		Adult Bron.	\$35	\$43								
Adult Silver	\$40	\$48		Adult Silver	\$40	\$48								

Dance Partner _____ Solo _____ Standard _____ Adult _____ Masters _____

TR 12.01 The USFSA and its Member Clubs holding tests undertake no responsibility for damages or injuries suffered by the candidates. As a condition of and in consideration of the acceptance therefore, all candidates and their parents and/or guardians shall be deemed to have agreed to assume all risks of injury to the candidate's person and property resulting from, caused by or connected with, the conduct and management of tests, and to release any and all claims which they may have against any officials, USFSA, the club holding the tests, and against their officers, and applications shall be accepted only on the foregoing conditions.

Parent's/Skater's signature: _____ Date: _____
(Parent if skater is under 18)

Out of club members only Home Club permission to test: _____ is a member in good standing at her/his home club, has met all USFSA requirements, and has permission to take the above identified tests at the Thomas Creek Figure Skating Club.

Club Officer's Signature: _____ Title: _____ Date: _____

TEST FEES	
Registration	\$
\$15 for TCFSC members	
\$25 for non TCFSC members	
Moves	\$
Freestyle	\$
Dance	\$
Late Fee (\$25 no exceptions)	\$
TOTAL	\$

Make checks payable to: Thomas Creek Figure Skating Club

Mail check and fully completed application to:

Barbara Catalano
ATTN: TESTING
5 Reitz Circle
Pittsford, NY 14534

Questions?
barbara.catalano1@gmail.com

TCFSC Home Club members have testing 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 late fees. NO REFUNDS.

*Deadlines serve as an ending date to accept applications and in no way guarantees a skater a testing spot.