

Skater: _____ USFS# _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Telephone: _____

Parent Name (if under 18): _____ 2011-2012 Home Club: _____

*If Home Club is not Skating Club of Brewster, attach test permission slip from your home club as stated in TR3.08 of the USFSA Rulebook.

Coach: _____

Coach's email: _____ Coach's phone: _____

Is your coach CER compliant for 2011-2012? Yes _____ No _____

In accordance with USFS regulations: All coaches must be CER compliant and registered with USFS for 2011-2012 season or he/she cannot put you on at the test and will not be allowed in testing zone.

Coach's signature: _____ Date: _____

PLEASE CIRCLE TESTS DESIRED:

	<u>MOVES:</u>	<u>FREE SKATE:</u>		
Pre-Preliminary	\$44.00	\$44.00		
Preliminary	\$44.00	\$44.00		
Pre-Juvenile	\$44.00	\$44.00		
Juvenile	\$49.00	\$44.00		
Intermediate	\$49.00	\$44.00	Test Fee Total:	\$ _____
Novice	\$54.00	\$49.00	Plus Ice Fee (All Skaters)	\$ 25.00
Junior	\$54.00	\$49.00	Guest fee: \$30.00	\$ _____
Senior	\$54.00	\$49.00	Assoc Member Fee \$15.00	\$ _____
Adult Pre-Bronze	\$44.00	\$44.00	Late Fee \$25.00	\$ _____
Adult Bronze	\$44.00	\$44.00	(applications postmarked after deadline)	
Adult Silver	\$49.00	\$49.00		
Adult Gold	\$54.00	\$54.00	Total Enclosed:	\$ _____

If you are taking more than one test and two different coaches are putting you on, please submit separate applications.

If you sign up for a Moves and Freestyle test at the same level and do not pass the Moves test, the fee for the freestyle test will not be refunded. If you register for more than one Moves test, you must pass the lower level test first in order to take the higher level test. If you do not pass the lower level test, you may not take the higher level test and the fee will not be refunded.

*Music for Freestyle Programs will be accepted in the form of CD only.

Application and payments must be postmarked two weeks prior (1/16/2012) to test date. Applications sent after the deadline date are accepted at the discretion of the Test Chair and will require a \$25 late fee. Priority is given to SCOB Home Club and Associate Members. Test fees are non-refundable.

Communication regarding test schedule will be via email. Please check your email regularly in the days leading up to the test.

Please be at the rink at least 1 hour prior to your test and check in with test chair.

Please mail Test Application, Home Club Permission (if applicable) and Check payable to the Skating Club of Brewster to: **Frances Flink 3 Katonah Crossing Ct, Katonah, NY 10536.** Any questions please email: franflink004@aol.com **All applications must be mailed to this address or they will not be accepted.**

I acknowledge that I have read and agree to the rules concerning this application:

Signature of Parent: (for skaters under 18 years)

_____ Date _____

Signature of Skater (for skaters 18 years and over)

_____ Date _____