

Genesee Figure Skating Club

Test Application

Test Date: Mon. Nov. 25, 2019 5:00 PM – 10:00 PM

Applications postmarked by Nov. 13, 2019

NAME: _____

USFSA #: _____

ADDRESS: _____

EMAIL (print clearly): _____

HOME CLUB: _____

PHONE: _____

For Test Session:

Freestyle Coach: _____

PRO SIGNATURE: _____

MITF Coach: _____

Hospitality: _____

Dance Coach: _____

Carefully circle all tests required.

| Moves | In Club Fee | Out of Club Fee | Freestyle | In Club Fee | Out of Club Fee | Dances (fee is per dance) | In Club Fee | Out of Club Fee |
|-------------|-------------|-----------------|------------|-------------|-----------------|--------------------------------------|-------------|-----------------|
| PrePre | \$23 | \$35 | PrePre | \$21 | \$35 | Prelim DW CT RB | \$21 | \$30 |
| Prelim | \$26 | \$38 | Prelim | \$24 | \$38 | PreBrz SD CC FIT | \$22 | \$33 |
| PreJuv | \$29 | \$41 | PreJuv | \$27 | \$41 | Bronze HH WIW TF | \$25 | \$38 |
| Juv | \$33 | \$43 | Juv | \$30 | \$43 | PreSil 14S EW FT | \$29 | \$40 |
| Inter | \$37 | \$48 | Inter | \$33 | \$48 | Silver AW T RF | \$33 | \$48 |
| Novice | \$41 | \$53 | Novice | \$36 | \$53 | PreGld K BL PD SW | \$37 | \$51 |
| Junior | \$43 | \$58 | Junior | \$39 | \$58 | Gold VW WW QS AT | \$43 | \$58 |
| Senior | \$45 | \$63 | Senior | \$43 | \$63 | Canadian Gold: (circle dance/dances) | \$48 | \$58 |
| Inter Supp. | \$45 | \$63 | | | | QS VW WW AT SS | | |
| Senior Supp | \$45 | \$63 | | | | International (circle dance) | \$48 | \$68 |
| Adult PBrz | \$28 | \$38 | Adult PBrz | \$25 | \$38 | RV SS MB CON YP TR GW | | |
| Adult Brz | \$33 | \$43 | Adult Brz | \$30 | \$43 | AW | | |
| Adult Silv | \$41 | \$48 | Adult Silv | \$38 | \$48 | | | |
| Adult Gld | \$45 | \$53 | Adult Gld | \$43 | \$53 | | | |

Dance Partner _____ **Standard** _____ **Adult** _____ **Masters** _____

TR 12.01 The UFSFA 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 Genesee Figure Skating Club.

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

TEST FEES

| | |
|--|-----------|
| Registration \$10 for club members \$25 for non club members | \$ |
| Moves | \$ |
| Freestyle | \$ |
| Dance | \$ |
| Late Fee (\$25, no exceptions) | \$ |
| TOTAL FEES DUE | \$ |

Make checks payable to: Genesee Figure Skating Club

Mail check and fully completed application to:

Stephanie Dillingham

ATTN: TESTING

25 Wandering Trail., Pittsford, NY 14534

Questions: Stephanie Dillingham, milby35@hotmail.com

Only **fully** completed applications, accompanied by payment of all fees will be accepted. Late applications will be accepted only with late penalty fees and as schedule permits. **No refunds.**