

**Endorsed by the  
Ice Skating Institute**

**ISI FLAG CITY OPEN COMPETITION  
INDIVIDUAL SKATING ENTRY FORM  
NOVEMBER 19-20, 2011**

**Return forms to:  
Silver Blades Figure Skating Club  
c/o Tracy Koehler  
16250 E. Beechwood Rd.  
Findlay, OH 45840  
419-306-7512/jck2@aol.com**

*(Please print legibly. All information is REQUIRED to process application.)*

First Name, Last Name \_\_\_\_\_ Email Address (main form of communication) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Age (as of 11/19/11) \_\_\_\_\_ Sex (Check One)  Male  Female Birthdate \_\_\_\_\_ Phone \_\_\_\_\_

Representing Rink \_\_\_\_\_ Coaches First & Last Name \_\_\_\_\_ Are you an active USFS skater who has competed at or above the Novice level the last 2 yrs?  Yes  No

ISI# \_\_\_\_\_ Highest Test Level Passed \_\_\_\_\_ USFS# \_\_\_\_\_ Highest Test Level Passed \_\_\_\_\_

**TOT & P-ALPHA-DELTA (Indiv. Events)**

Solo  Stroking  Surprise  Interpretive

Indicate Level \_\_\_\_\_

**FREESTYLE (FS1-10 & Open Events):**

Solo FS  Open FS  Compulsory  Artistic Solo  Footwork

Surprise  Interpretive

Indicate FS Level(s) \_\_\_\_\_

**INDIV SPOTLIGHT (Pre-Alpha – FS10):**

Lt. Entertainment  Character  Dramatic  Rhythmic Skating

Indicate Level \_\_\_\_\_

Indicate Prop (Rhythmic only) \_\_\_\_\_

**PARTNERED EVENTS**

Sim Mix

Partner(s) Name

Partner ISI#

Age

<input type="checkbox"/> Couples Freestyle (FS1-10)	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> Pair (FS1-10) Level:	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> Couple Spotlight (please indicate level & theme): <input type="checkbox"/> Low (PA-Delta) <input type="checkbox"/> Medium (FS 1-3) <input type="checkbox"/> Int. (FS 4-5) <input type="checkbox"/> High (FS 6-10) <input type="checkbox"/> Light Entertainment <input type="checkbox"/> Dramatic <input type="checkbox"/> Character					
<input type="checkbox"/> Family Spotlight (each family member must enter this event on their application)					
<input type="checkbox"/> Jump & Spin Team <input type="checkbox"/> Low (Pre-Alpha-Delta) <input type="checkbox"/> Medium (FS 1-3) <input type="checkbox"/> Intermediate (FS 4-5) <input type="checkbox"/> High (FS 6-10)					

**DANCE EVENTS**

Partner Name

Partner ISI#

Age

<input type="checkbox"/> Dance (1-10) Indicate <b>Specific Dance</b> (Choice Dance) to be skated & Highest Test Level Passed:			
<input type="checkbox"/> Solo <input type="checkbox"/> Mixed			

Silver Blades Figure Skating Club & The Cube, undertake no responsibility for damage or injuries suffered by the skaters or officials. As a condition of their entries or participation therein, all entrants, their parents or guardians do hereby agree to assume all risks of injury to their person and property arising out of any activity related directly to the 2011 ISI Flag City Open Competition, regardless of the negligence on the part of anyone whomsoever.

I skate at this competition at my own risk.

\_\_\_\_\_  
(Signature of Skater) Date \_\_\_\_\_

\_\_\_\_\_  
(Signature of Parent or Guardian) Date \_\_\_\_\_

I declare that the above information is true and that this skater is registered and is an individual member of the ISI.

\_\_\_\_\_  
(Signature of Coach or Rink Manager) Date \_\_\_\_\_

Will your coach be attending/judging?  Yes  No

Coach Email Address \_\_\_\_\_ Coach ISI # \_\_\_\_\_

**ENTRY DEADLINE: October 21, 2011**

**Turn in entry forms & checks to team coach.** Please make checks payable to **Silver Blades Figure Skating Club.**

**Team Coach:** Entries must be postmarked on or before **October 14, 2011.** Late entries must pay a \$20.00 late fee. We reserve the right to limit the number of entries (first come, first served).

ENTRY FEE TABLE	COST PER	NUMBER	TOTAL
First Entry	\$45.00		
Family Entry - includes 1 event for up to 3 immediate family members (please complete individual entry forms for each skater)	\$70.00		
Each Additional Event	\$10.00		
Late Entry Fee (if postmarked after October 14, 2011)	\$20.00		
<b>GRAND TOTAL:</b>			<b>\$</b>

OFFICE USE ONLY - Amt. Pd. \_\_\_\_\_ Date \_\_\_\_\_ Initial \_\_\_\_\_