

Endorsed by:
THE ICE SPORTS
INDUSTRY

Send entry and fee to:
The Silver Blades FSC
c/o Cassie Muzy Treasurer
3021 County Road 220
Findlay, OH 45840

2018 Flag City Competition
Hosted by the Findlay Silver Blades FSC at the Cube: Findlay Sports-Plex
November 17-18, 2018

SKATER INFORMATION **Only current ISI Members are eligible to participate**

Last Name	First Name	ISI #	M/F
Address		Birthdate	Age on 11/17/18
City	State	Zip	Phone #
Home ISI Member Rink/Club		E-mail (required)	USFS FS Test Level
Are you an active USFS member who has competed at or above the Novice level at any USFS Nation Championships within the last two years?			Yes/No

INDIVIDUAL EVENTS **Highest test levels must be registered by October 13, 2018**

<p>Highest ISI Test Level _____ Tot 1-4/Pre-Alpha-Delta FS 1-10 or Bronze-Platinum</p> <p><input type="checkbox"/> Solo Program</p> <p><input type="checkbox"/> Compulsories (FS 1-10)</p> <p><input type="checkbox"/> Solo Spotlight</p> <p style="padding-left: 20px;"><input type="checkbox"/> Character</p> <p style="padding-left: 20px;"><input type="checkbox"/> Dramatic</p> <p style="padding-left: 20px;"><input type="checkbox"/> Light Entertainment</p> <p><input type="checkbox"/> Solo Dance _____ indicate specific dance</p> <p><input type="checkbox"/> Solo Free Dance _____ indicate level</p>	<p><input type="checkbox"/> Stroking (Alpha-Delta only)</p> <p><input type="checkbox"/> Footwork (FS 1-10)</p> <p><input type="checkbox"/> Interpretive (FS 1-10, Bronze-Platinum)</p> <p><input type="checkbox"/> Rhythmic Skating (FS 1-10)</p> <p style="padding-left: 20px;"><input type="checkbox"/> Ball</p> <p style="padding-left: 20px;"><input type="checkbox"/> Hoop</p> <p style="padding-left: 20px;"><input type="checkbox"/> Ribbon</p> <p><input type="checkbox"/> Artistic (FS 1-10)</p> <p><input type="checkbox"/> Special Skater Solo (1-10)</p>	<p><u>ISI Open Freestyle</u></p> <p><input type="checkbox"/> Bronze (FS 1-3)</p> <p><input type="checkbox"/> Silver (FS 4-5)</p> <p><input type="checkbox"/> Gold Short (FS 6-7)</p> <p><input type="checkbox"/> Gold (FS 6-7)</p> <p><input type="checkbox"/> Platinum Short (FS 8-10)</p> <p><input type="checkbox"/> Platinum (FS 8-10)</p> <p><input type="checkbox"/> Platinum Plus (FS 8-10)</p>
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PARTNER EVENTS

<p><input type="checkbox"/> Couples <input type="checkbox"/> Same <input type="checkbox"/> Mixed</p> <p>Partner Name: _____</p> <p>Partner ISI #: _____</p> <p>Partner Age: _____ Level (1-10)</p> <p><input type="checkbox"/> Pairs</p> <p>Partner Name: _____ ISI # _____</p> <p>Partner ISI #: _____</p> <p>Partner Age: _____ Level (1-10)</p> <p><input type="checkbox"/> Couples Spotlight</p> <p>Partner Name: _____</p> <p>Partner ISI #: _____ Partner Age: _____</p> <p>Low <input type="checkbox"/> Bronze <input type="checkbox"/> Silver <input type="checkbox"/> Gold <input type="checkbox"/> Platinum <input type="checkbox"/></p> <p>Character <input type="checkbox"/> Dramatic <input type="checkbox"/> Lt. Ent. <input type="checkbox"/></p> <p><input type="checkbox"/> Couples Dance</p> <p>Partner Name: _____</p> <p>Partner ISI #: _____ Partner Age: _____</p> <p>Indicate Specific Dance to be Skated: _____</p>	<p><input type="checkbox"/> Jump & Spin</p> <p>Partner Name: _____ ISI # _____</p> <p>Partner Age: _____</p> <p>Low <input type="checkbox"/> Bronze <input type="checkbox"/> Silver <input type="checkbox"/> Gold <input type="checkbox"/> Platinum <input type="checkbox"/></p> <p>There will be NO REFUNDS. Silver Blades FSC reserves the right to limit the number of Entries without notice. I skate at this competition at my own risk and hereby release Silver Blades FSC, the host facility and their officers, directors, officials and personnel from all liability. I declare that the home rink listed above is the true rink/club/school that I wish to represent. Upon entering this competition, I hereby agree that any photographs or video taken of me, by Silver Blades FSC or any authorized party, may be used exclusively for any purpose by Silver Blades FSC and District 7.</p> <p>_____ Skater Signature _____ Date</p> <p>_____ Parent/Guardian (if applicable) _____ Date</p> <p>_____ Coach Name (Required) _____ ISI # (Required)</p> <p>_____ Coach Email (Required) _____ Coach Certification Level</p> <p>_____ Coach's Signature</p>
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FEES & PAYMENT

First event \$50 x 1 = _____

Family Entry \$80 x ____ = _____
(Includes one event for up to three family members.
Please include separate entry forms for each skater)

Additional Entry \$15 x ____ = _____

Late Fee (if after Oct. 13th) \$25 x 1 = _____

Total Enclosed = _____

2018 Flag City Competition - TEAM FORM
Hosted by the Findlay Silver Blades FSC at the Cube: Findlay Sports-Plex
November 17-18, 2018

YOUR INFORMATION Only current ISI Members are eligible to participate

Name of Team	Home ISI Member Rink/Club
Coach Name	Coach ISI #
	Coach Certification Level
Coach Phone #	ISI Team Registration #
Coach E-mail (Required)	

WE WISH TO ENTER: (Important: Use one team entry form per team, per event)

<input type="checkbox"/> Synchronized Formation Compulsories <input type="checkbox"/> Synchronized Skating Compulsories <input type="checkbox"/> Synchronized Formation Team <input type="checkbox"/> Synchronized Advanced Formation Team <input type="checkbox"/> Synchronized Skating Team <input type="checkbox"/> Synchronized Open Skating Team <input type="checkbox"/> Synchronized Dance Age Category (choose one) <input type="checkbox"/> Tot <input type="checkbox"/> Junior Youth <input type="checkbox"/> Youth <input type="checkbox"/> Senior Youth <input type="checkbox"/> Teen <input type="checkbox"/> Collegiate <input type="checkbox"/> Adult	<input type="checkbox"/> Family Spotlight <input type="checkbox"/> Production Team <input type="checkbox"/> Ensemble <input type="checkbox"/> Pattern Team <input type="checkbox"/> Kaleidoskate Team <input type="checkbox"/> Team Compulsories ____ Level <input type="checkbox"/> Freestyle Synchro ____ Level <input type="checkbox"/> Theater Production
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PLEASE ATTACH A TEAM ROSTER WITH NAMES, AGES AND ISI NUMBERS OF ALL TEAM MEMBERS

There will be NO REFUNDS. Memberships must be current through event. Expired membership renewals must accompany this entry application. Upon entering this competition, we hereby agree that any photographs or video taken of our team by Silver Blades or District 7 or authorized party may be used exclusively for any purpose by Silver Blades, District 7 or any other use authorized by Silver Blades FSC or District 7. I declare that the information above is true and that all skaters have current individual memberships with ISI. I have notified all team members that they skate at their own risk, and hereby release Silver Blades FSC, District 7, the host facility and their officers, directors, officials and personnel from all liability.

FEES & PAYMENT

<input type="checkbox"/> Team Entry	=	<u>\$40</u>
# of skaters	_____ x \$10 =	_____
(including alternates)		
TOTAL	=	_____

Coach Signature _____ Date _____