



TEST APPLICATION

ONLY FULLY COMPLETED FORMS WILL BE ACCEPTED. Incomplete forms will be returned to your professional and will need to be resubmitted prior to the test application deadline.

There will be **no refunds** after the test application deadline.

Test Application Deadline: January 16, 2018 Test Date: January 25, 2018

Skater's Name _____

ISI Number (required) _____ Contact Phone _____

Partner's Name (dance, pairs, couples) _____

Test Requested

Freestyle _____
(Indicate Freestyle 1-7*)

Other _____
(Pre-Alpha-Delta, etc.)

Dance _____
(Indicate Dance 1-7*)

Pairs/Couples _____
(Indicate Pairs/Couples 1-7*)

Skater's Signature date

Primary Coach's Signature date

Professionals ISI # _____

Exp. Date _____

TEST FEE

Pre-Alpha-Delta=\$10	_____
FS/Dance/Couples/ Pairs 1 - 7 Test = \$25	_____
Total:	\$ _____

List Other Coaches

Please list other coaches with which your child takes lessons.

In order to be accepted, test fees must accompany this test form and must be received by the test application deadline. Mail or give this *application and fee* to Treasurer, *Cassie Muzy*, 3021 County Road 220, Findlay, OH 45840.

Make checks payable to Silver Blades FSC.

**Freestyle/Couples/Pairs/Dance 8-9 tests require additional ISI application & approval prior to the test being video taped or skater must participate in a District Freestyle Testing Program. Freestyle/Couples/Pairs/Dance 10 tests must be done at a national event. If you wish to test any of these, please contact the Head Pro.*