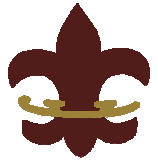


# The DuPage Figure Skating Club



## Test Application for the South - Southwest Region

Test Date Desired: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (due 20 days before desired date)

Name \_\_\_\_\_

USFSA # \_\_\_\_\_

Address \_\_\_\_\_

DuPage FSC Membership:

City \_\_\_\_\_

Registered Member  Registered Coach (extra \$15 fee)

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Name of Club if not DuPage member: \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ - \_\_\_\_\_

NonMember (\$20 Out-Of-Club fee & Out-Of-Club Permission MUST be included w/this application)

Applicant signature \_\_\_\_\_

Parent's signature (if skater is under 18) \_\_\_\_\_

<b>Previous Moves Test Taken</b> Level: _____		<b>Result (circle)</b> Pass / Retry		<b>Previous Freestyle Test Taken</b> Level: _____		<b>Result (circle)</b> Pass / Retry						
<b>Include a separate check for each test. Make checks payable to DuPage FSC. Do NOT send cash.</b> <b>Please check test desired. * Fee does NOT include ice time.</b>												
<input type="checkbox"/>	<b>MOVES</b>		<b>Fee*</b>		<input type="checkbox"/>	<b>FREESTYLE</b>		<b>Fee*</b>				
	Pre-Preliminary		\$9			Pre-Preliminary		\$9				
	Preliminary		\$11			Preliminary		\$11				
	Pre-juvenile		\$11			Pre-juvenile		\$13				
	Juvenile		\$13			Juvenile		\$15				
	Intermediate	Supplemental	\$16	\$19		Intermediate		\$17				
	Novice		\$19			Novice		\$19				
	Junior		\$21			Junior		\$21				
	Senior	Supplemental	\$26	\$29		Senior		\$26				
<b>Previous Pairs Test Taken</b> Level: _____			<b>Result (circle)</b> Pass / Retry		<b>Previous Adult Freestyle or Moves Test Taken - Level:</b> _____			<b>Result (circle)</b> Pass / Retry				
<input type="checkbox"/>	<b>PAIRS</b>		<b>Fee*</b>		<input type="checkbox"/>	<b>FREESTYLE</b>		<input type="checkbox"/>	<b>MOVES</b>		<b>Fee*</b>	
	Pre-Juvenile		\$19/applicant			Pre-Bronze			Pre-Bronze		\$13	
	Juvenile		\$19/applicant			Bronze			Bronze		\$16	
	Intermediate		\$21/applicant			Silver			Silver		\$21	
	Novice		\$25/applicant			Gold			Gold		\$25	
	Junior		\$27/applicant		<b>For Pair tests: Partner's name &amp; USFSA #</b>							
	Senior		\$31/applicant									

### Rules and Regulations

- **Any cancellation less than 48 hours prior to test date (not test time), will result in a forfeiture of fees.**
- Scheduled times are approximate and tentative. Skaters should arrive at least one (1) hour before scheduled time.
- Although efforts will be made to accommodate the following situations: requests/withdrawals/wait-listed/Retry from a session, it does not mean the skater will automatically be scheduled for the next test date. Session size is limited.
- Twenty seven (27) days must pass before candidate qualifies to Retry the same test.

### Application is incomplete without checking-off the following:

- USFSA # included
- Correct test date requested
- Correct fee for tests
- Correct test requested
- Separate check for each test**
- Separate application for each test**
- Applicant is ready to test** – Coach's signature of approval: \_\_\_\_\_
- Out-Of-Club Fee
- Out-Of-Club Permission
- Check here if O-O-C does not apply

**Test Chairman: Mrs. Dana Calayag – (847) 679-1583**

Mail this application to: Angela Pearson - South ~ Southwest Region Asst.  
c/o Kay Larson  
PO Box 2913  
Joliet, IL 60434 (630) 753-0232

Coach Name (print): \_\_\_\_\_ Coach Phone (NOT @ rink) ( ) \_\_\_\_\_ - \_\_\_\_\_

W 12/2011 Check #: \_\_\_\_\_ Amount: \_\_\_\_\_ Skater's Training Rink \_\_\_\_\_