

# Ice Skating Club of Fresno Test Application

**Registration deadline: 12/29/18**  
 Test Date: 1/11/19 (2-3pm)

Applicant \_\_\_\_\_ USFS# \_\_\_\_\_  
 Contact # \_\_\_\_\_ Email \_\_\_\_\_  
 Home Address \_\_\_\_\_  
 Coach's Name \_\_\_\_\_ Home Club \_\_\_\_\_

I acknowledge that the sport of figure skating is an inherently dangerous sport and I assume any and all risk of injury or damage while at the test session. Therefore, I agree to hold harmless: the Ice Skating Club of Fresno, including its directors and officers, test chairs, and any of its members or guests; and, any other professional and/or skater from any injury or damage resulting from, but not limited to, falls, collisions, ice conditions, or any occurrences during ISCF test sessions.

**Adult Applicant or Parent Signature (if under 18)** \_\_\_\_\_

I have reviewed and approve this skater for the indicated test(s). With my signature I certify that I have complied with ALL USFS coach's requirements as they relate to membership, coach compliance, and CERs.

**Coach's Signature** \_\_\_\_\_ **Coach's Email** \_\_\_\_\_

Please check the test(s) below that you wish to take

| Moves In The Field |  |      | Free Skate |  |      |
|--------------------|--|------|------------|--|------|
|                    | Pre Preliminary                        | \$37 |            | Pre Preliminary                        | \$32 |
|                    | Preliminary                            | \$42 |            | Preliminary                            | \$37 |
|                    | Adult Pre Bronze                       | \$42 |            | Adult Pre Bronze                       | \$37 |
|                    | Adult Bronze                           | \$47 |            | Adult Bronze                           | \$42 |
|                    | Special Olympic/Therapeutic Pre Bronze | \$32 |            | Special Olympic/Therapeutic Pre Bronze | \$27 |
|                    | Critique Only                          | \$25 |            |  |      |

(Please indicate what you would like to be critiqued on)

Check this box if you intend to provide background music to be played during a MIF test

**Please note, this test session will be held during freestyle ice time.**

**Prices listed do not include ice fee. Skaters must purchase a freestyle voucher the day of the test.**

Skaters will receive a USFS certificate & patch for each test passed (no additional charge). Judges' hospitality fees have been included in prices listed above. **\*Important:** A **\$25 late fee** in addition to appropriate test fees must be included for all applications submitted past the deadline date. **No refunds after registration deadline.** A **\$25 return check fee**, plus any additional bank fees, will be charged in the event of a returned check. **\*\*Very Important Note:** Applicants who are non-ISCF Home Club Members must submit a letter of permission from their home club to be allowed to test and will be scheduled on a space available basis. In addition, \$30 must be added to all prices listed above for non-ISCF member applicants. **Make check or money order payable to Ice Skating Club of Fresno.**

**ISCF members:** return completed application and fees to the Test Chair, in person, by mail, drop in the ISCF box in the rink office or submit online at ISCFresno.org

**Non-ISCF members:** return completed application, permission letter, and all fees by mail to the Test Chair, or submit online at ISCFresno.org

***If you would like a letter of achievement sent to your school, please complete the following:***

School Name \_\_\_\_\_ Principal/Counselor Name \_\_\_\_\_

School Address \_\_\_\_\_

**Questions or concerns please contact the ISCF Test Chair, Janel Chastagner:**

**(559) 916-6759**

**Pingwenlover@aol.com**

**3006 Miami CT, Clovis, CA 93611**