



Saratoga Springs Figure Skating Club
US Figure Skating Test Session Application

Date/Time: Sunday Aug 26th, 2018 8am-4pm Place: Vernon Ice Rink
 30 Weibel Avenue, Saratoga Springs, NY

Skater's Name: _____ USFS #: _____ Tel. #: _____

Address: _____ E-Mail: _____

City: _____ State: _____ Zip Code: _____

Home Club: _____ USFS#: _____

Coach's Name: _____ Tel. #: _____ USFS #: _____

Note: Coaches' CER Compliancy will be checked

Coach's Signature: _____

Parent's/Guardian's Signature (if skater under 18): _____

ALL FEES MUST ACCOMPANY TEST APPLICATION AND APPLICATION MUST BE FILLED IN COMPLETELY OR TEST(S) WILL NOT BE SCHEDULED

FEES SCHEDULE: Fee(s) will not be reimbursed once the test schedule is posted.
 PLEASE CIRCLE MOVES/FREESTYLE/SOLO FREE DANCE and LEVEL.

MOVES / FREESTYLE / SOLO FREE DANCE		DANCE: Please circle each dance	
Pre-Preliminary	\$42	Preliminary	DW CT RB \$42 / dance
Preliminary	47	Pre-Bronze	SD CC FIT 47 / dance
Pre-Juvenile / Adult Pre-Bronze	52	Bronze	HH WIW TF 52 / dance
Juvenile / Adult Bronze	57	Pre-Silver	14S EW FT 57 / dance
Intermediate / Adult Silver	62	Silver	AW T RF 62 / dance
Novice / Adult Gold	67	Pre-Gold	PD K B SW 67 / dance
Junior	72	Gold	VW WW QS AT 72 / dance
Senior	77	International	R ASW CCC YP
			RW TR SS GW
			MB 77 / dance

***If re-trying a test, it is your responsibility to make sure that there are 28 days between tests.**

Dance Partner: _____ USFS#: _____

Make check payable to: SARATOGA SPRINGS FIGURE SKATING CLUB (SSFSC)

Mail Check and Application to: Jill Ramos
 180 Lake Avenue, Saratoga Springs, NY 12866

Application (with payment and USFS #) MUST BE RECEIVED BY: Saturday, Aug 18th, 2018

Late applications will be accepted if ice time permits but will be assessed a \$10 late fee.

There will be a \$30 returned check fee for any check written against insufficient funds. Scheduling preference will be given to SSFSC members first. Schedule will be posted: Tuesday, Aug 21st, 2018. List any special requests on a separate page and we will do our best to accommodate them. Please note that NO special requests will be considered after the application has been turned in.

We cannot accommodate any changes to the schedule once it is posted.

Home Club Permission to Test: (signature NOT required for SSFSC home club members)

To the best of my knowledge, _____ is a member in good standing* with his or her Home Club and has permission to test at the Saratoga Springs Figure Skating Club's Aug 26th test session.

Signature: _____ Club & Office Held: _____ Date: _____

***To be in good standing, a skater must be a current US Figure Skating member and be up to date with payments to their home club. This information will be verified.**