

Rocky Mountain Figure Skating Club

Test Application

Please read all guidelines on the reverse side of this application and sign acknowledging agreement and fill out the complete test form. Any forms not complete by the test deadline will be considered late.

Name: _____
 Address: _____
 City & Zip Code: _____
 Home Club: _____

Test Date: _____
 Phone: _____
 USFSA No: _____
 Assoc Club: _____

If you wish to have notification of test passed sent to your school please fill out the following:

Name of School: _____
 Address of School: _____

Principal: _____
 City, St , Zip: _____

PLEASE CHECK TEST(S) TO BE TAKEN:

Singles				
Level	MIF	Freeskate		
Pre-Prel	<input type="checkbox"/>	\$43	<input type="checkbox"/>	\$25
Prelim	<input type="checkbox"/>	\$45	<input type="checkbox"/>	\$25
Pre-Juv	<input type="checkbox"/>	\$45	<input type="checkbox"/>	\$25
Juv	<input type="checkbox"/>	\$45	<input type="checkbox"/>	\$25
Intermed	<input type="checkbox"/>	\$50	<input type="checkbox"/>	\$30
Novice	<input type="checkbox"/>	\$52	<input type="checkbox"/>	\$30
Junior	<input type="checkbox"/>	\$54	<input type="checkbox"/>	\$30
Senior	<input type="checkbox"/>	\$56	<input type="checkbox"/>	\$30
Adult Pre-Bronze	<input type="checkbox"/>	\$43	<input type="checkbox"/>	\$25
Adult Bronze	<input type="checkbox"/>	\$43	<input type="checkbox"/>	\$25
Adult Silver	<input type="checkbox"/>	\$50	<input type="checkbox"/>	\$30
Adult Gold	<input type="checkbox"/>	\$50	<input type="checkbox"/>	\$30

Pairs (Per Skater)		
Prelim	<input type="checkbox"/>	\$25
Juv	<input type="checkbox"/>	\$29
Intermed	<input type="checkbox"/>	\$29
Novice	<input type="checkbox"/>	\$29
Junior	<input type="checkbox"/>	\$30
Senior	<input type="checkbox"/>	\$31

Dance** (per Skater)							
Preliminary		Pre Gold					
Dutch Waltz	<input type="checkbox"/>	\$25	Kilian	<input type="checkbox"/>	\$35		
Canasta Tango	<input type="checkbox"/>	\$25	Blues	<input type="checkbox"/>	\$35		
Rhythm Blues	<input type="checkbox"/>	\$25	Paso Doble	<input type="checkbox"/>	\$35		
All three same day	<input type="checkbox"/>	\$60	Gold				
Pre-Bronze		Viennese Waltz		<input type="checkbox"/>	\$35		
Swing Dance	<input type="checkbox"/>	\$25	Westminster Waltz	<input type="checkbox"/>	\$35		
Cha-Cha	<input type="checkbox"/>	\$25	Quick Step	<input type="checkbox"/>	\$35		
Fiesta Tango	<input type="checkbox"/>	\$25	Argentine Tango	<input type="checkbox"/>	\$35		
All three same day	<input type="checkbox"/>	\$60	Jr/Sr International				
Bronze		Please write in dance to be taken					
Hickory Hoedown	<input type="checkbox"/>	\$25	<input type="checkbox"/>	\$35			
Willow Waltz	<input type="checkbox"/>	\$25	<input type="checkbox"/>	\$35			
Ten-Fox	<input type="checkbox"/>	\$25	Free Dance (Per Skater)				
All three same day	<input type="checkbox"/>	\$60	Juvenile	<input type="checkbox"/>	\$25		
Pre Silver		Intermediate				<input type="checkbox"/>	\$29
Fourteenstep	<input type="checkbox"/>	\$30	Novice	<input type="checkbox"/>	\$29		
European Waltz	<input type="checkbox"/>	\$30	Junior	<input type="checkbox"/>	\$30		
Foxtrot	<input type="checkbox"/>	\$30	Senior	<input type="checkbox"/>	\$31		
Silver		Dance Partner: Please list					
American Waltz	<input type="checkbox"/>	\$30					
Tango	<input type="checkbox"/>	\$30					
Rocker Foxtrot	<input type="checkbox"/>	\$30					

**If you are taking dance test(s): Will this test complete a level? Yes No

TOTAL FOR TEST(S) TAKEN:

ADMINISTRATIVE FEE \$5.00 (TO BE PAID BY ALL APPLICANTS)	_____	\$5.00
RMFSC ASSOCIATE MEMBERS (ADD \$10.00)	_____	
NON CLUB MEMBERS (ADD \$25.00)	_____	
LATE FEE \$20.00 (IF TURNED IN AFTER DEADLINE)	_____	
TOTAL FOR THIS TEST SESSION	_____	

Completed test applications must be turned into the LOCKED BOX in the skaters locker room at the Sun Microsystems Ice Center or RECEIVED by mail at 4490 Maroon Cr, Broomfield, CO 80023 no later than 6:00 pm on the test deadline date. Any questions contact, Sara Kihn at 303.465.4821 or 303.931.4869.

For test chair use only:

Check #	Amt. Paid	Credit Due

RMFSC TESTING TERMS EFFECTIVE JANUARY 2004

Please read the following guidelines and initial in the appropriate box that you have read the terms and agree to abide by them.

Skater Parent

1. Complete applications for tests must be received by the test chair by the deadline posted on the club bulletin board at Sun Microsystems Ice Centre. Completed applications include: RMFSC test application on reverse, **filled out completely** with signatures, membership application (if applicable), permission form or letter from home club if not a RMFSC member, and proper test fee. Failure to provide any of the previous constitutes an incomplete or late application. **LATE APPLICATIONS WILL NOW BE ACCEPTED ONLY WITH APPROVAL OF THE TEST CHAIR AND WILL BE CHARGED A \$20.00 LATE FEE. THERE WILL BE NO EXCEPTIONS!**

2. **USFSA Number is required on the application. The only exceptions are if the member is new and testing for pre-preliminary and has not received their number from the USFSA.** In this instance please put "PENDING" in place of the number.

3. Schedules will be posted on the club bulletin board at Sun Microsystems Ice Centre **a minimum** of one week before the test date. This schedule is subject to change and it is the skater or parents responsibility to check for changes. Posted changes will be considered sufficient notice up to the day before the test.

4. Test fees will not be credited or refunded for canceled tests after the test deadline except in documented cases of illness, injury or a death in the immediate family. Fees will then be held and credited to the next test session

5. **Please be at the rink a minimum of 40 minutes before your scheduled test time and prepared to test at any time.** Cancelled tests can cause the test session to run ahead of schedule and if you are not prepared to test when called, we waste ice. We will not hold a test because it is running ahead of schedule. Not being ready for your test when called upon or an inconvenient test time is not grounds for refund.

6. Special requests will be granted only if the test chair is able to accommodate. **If the special request involves the club having to purchase additional ice time, the skater will be accountable for the additional cost in addition to the test fee. We remain committed to keeping the rates for members as low as possible and we will make every effort to maximize the use of ice available to us by running multiple tests with more than one panel of judges whenever that is feasible or permissible, within bounds of USFSA guidelines, while maintaining a quality testing environment.**

7. If you are planning to take a **Junior or Senior MIF or Freestyle test, or any dance test**, please notify the test chair 30 days in advance. This will give the test chair the opportunity to contact the qualified judges for those tests. The test chair reserves the right to cancel tests due to lack of appropriate judges.

8. If you are scheduled to take a MIF test and a Freestyle test at the same level on the same day and you do not pass the MIF test you will not be given a refund. The test fee for the Freestyle test will be credited until you are able to pass the MIF test.

9. All skaters must pay an administrative fee of \$5.00 **per test session**. This fee is to cover the costs of hospitality, paper, copying, stamps, etc.

10. Any test with less than twelve skaters signed up is subject to cancellation.

I have read the above guidelines and agree to abide by all terms.

Skaters Signature:

Parents Signature:

Coach Signature:

Signature of Board
Member/Home Club
