

Escondido Figure Skating Club Dance Test Application

Please ensure to fill out the form COMPLETELY. Incomplete forms will NOT be accepted. All applicants must be approved and signed by the coach and parent guardian, if candidate is under 18 years of age. **Skater responsible for accuracy of all information on form.**

Name (EXACTLY as on your USFSA card) _____ Test Date you are requesting / /
Last Test Passed _____ Date of Last Test Passed _____ Club Where Taken _____
Address _____ City _____ State _____ Zip Code _____

Telephone (____) _____ Home Club _____ USFSA# _____

If not Escondido HOME Member, you must have your Clubs WRITTEN permission to test PERMISSION TO TEST FOR SKATERS WHO ARE NOT ESCONDIDO HOME CLUB MEMBERS

This certifies that _____ is a member in good standing of _____ and has permission to test on the above date.

Signature of Home Clubs Board Member is Mandatory for Non Home Club Members to test

Please check the tests that you are requesting to test, ensuring that you qualify to take the test being requested:

Freedance

Juvenile	\$23.00
Intermediate	\$25.00
Novice	\$25.00
Junior	\$35.00
Senior	\$40.00

Compulsory Dances

	Circle Desired Test(s)	Please Check the appropriate one:
Preliminary		Solo
Pre—Bronze	\$15.00 DW CT RB	Adult
Bronze	\$15.00 SD CC FiT	Master
Pre-Si Iver	\$20.00 H H WiW TF	
Silver	\$25.00 14S EW FT	
Pre-Gold	\$25.00 AW T RF	
Gold	\$30.00 K BLPD SW	
International	\$35.00 VW WW QS AT	
	\$45.00 _____	

Please complete the following:

Partner's Name _____ USFSA # _____ For a Coach include PSA # _____
Test Level _____

Make checks payable to: Escondido FSC

Appropriate fees must accompany the test request form and be postmarked by the application deadline posted. A \$1 5.00 late fee will be charged if late and it is the Test Chairs discretion whether the application will be accepted late. Test applications received without fees and without a board member signature will be returned to the applicant. \$25 fee for any returned checks. If the test candidate cancels a test for ANY reason after the application deadline other than CERTIFIEDi injury, **THE TEST FEES WILL BE FORFEITED.** The test candidate must submit a new test request and test fee to reschedule the test. Requested test dates may not be available due to the number of test requests or judge availability. Tests will be rescheduled for the next available session. If the Test Chairman reschedules the test, no additional fees will be required. Testing Priority is 1) Home Club members 2) Associate Members 3) Non—Club members

Parent's Signature _____

Test Sub Total _____
\$40.00 For Non Club Member
\$20.00 For Associate Members
\$10.00 Ice Fee (Required All Skaters)
\$5.00 Hospitality Fee (Required All Skaters)
TOTAL Fees _____

Send application and check to: Lynn Geffel
2205 Eucalyptus Ave Ave.
Escondido, Ca 992029
7607352584
ambelyn3l@msn.com

Coach Signature _____
USFSA # _____ PSA Registration _____