PLEASE CONTACT **SANDYHOPPY@SBCGLOBAL.NET** FOR ANY TEST-RELATED QUESTIONS

CAPITAL CITY FIGURE SKATING CLUB

Moves in the	FIELD, FREE SKATE, AND PAIRS TEST A	APPLICATION 2018			
SKATER'S NAME	USFS Number				
Phone Number	EMAIL				
Home Club	Instructor				
PARTNER (IF APPLICABLE)	PARTNER'S PHON	NE			
EXPECTED TEST DATE (SEE CCFSC.ORG FOR FUTURE TEST DA			URE TEST DATES)		
	TEST SELECTION AND FEE	s			
Moves in the Field	FREE SKATE	Pairs	Pairs		
□Pre-Preliminary (\$45)	□Pre-Preliminary (\$45)	☐ Pre-Juvenile (\$45)	☐ Pre-Juvenile (\$45)		
□Preliminary (\$45)	☐Preliminary (\$45)	☐ Juvenile (\$50)	☐ Juvenile (\$50)		
□Pre-Juvenile (\$50)	□Pre-Juvenile (\$50)	☐Intermediate (\$55)	□Intermediate (\$55)		
□Juvenile (\$55)	□Juvenile (\$55)	□Novice (\$60)	□Novice (\$60)		
□Intermediate (\$60)	□Intermediate (\$60)	□Junior (\$65)	□Junior (\$65)		
□Novice (\$65)	□Novice (\$65)	☐Senior (\$70)	□Senior (\$70)		
□Junior (\$65)	□Junior (\$65)	☐Adult Bronze (\$60)	□Adult Bronze (\$60)		
□Senior (\$75)	□Senior (\$75)	□Adult Silver (\$65)	□Adult Silver (\$65)		
□Adult Pre-Bronze (\$50)	□Adult Pre-Bronze (\$50)	☐Adult Gold (\$70)	☐Adult Gold (\$70)		
□Adult Bronze (\$50)	☐Adult Bronze (\$50)				
□Adult Silver (\$55)	□Adult Silver (\$55)				
□Adult Gold (\$60)	□Adult Gold (\$60)	PLEASE SELECT A	PLEASE SELECT ALL THAT APPLY		
		□standard			
		□adult			
		□masters			
* Associate members pay	Sum of Fees From Selected Tests:				
additional \$20 * Non-members pay double test price	Add Judges/Volunteer Hospitality		\$5.00		
	Total Fees Due:				
shows or cancellations for any reason and fees must be paid prior to the test deadline	must include a permission letter from their a new application & fee is required to reschedu; if your test fees have not been paid by the tes cks must be made payable to CCFSC or Capit before test deadline (see ccfsc.org)	ule the test(s) once the ice has best deadline, your application will	een paid for. All		
SKATER'S SIGNATURE					
PARENT'S SIGNATURE		(REQUIRED)			
INSTRUCTOR APPROVAL					