

# Chicago Figure Skating Club Dance Test Application

Test Date: \_\_\_\_\_

Test Time: \_\_\_\_\_

Location: \_\_\_\_\_

Test Partner: \_\_\_\_\_

Skater's Name \_\_\_\_\_ USFSA # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (        ) \_\_\_\_\_

Home Club: \_\_\_\_\_

**Test(s) desired: (check all that apply)**

<b>Preliminary</b>	Dutch Waltz \$15	Tango \$15	Rhythm Blues \$15
<b>Pre Bronze</b>	Swing Dance \$15	Cha Cha \$15	Fiesta \$15
<b>Bronze</b>	Hickory Hoedown \$20	Willow Waltz \$20	Ten Fox \$20
<b>Pre-Silver</b>	Fourteen Step \$20	European Waltz \$20	Foxtrot \$20
<b>Silver</b>	American Waltz \$25	Tango \$25	Rocker Foxtrot \$25
<b>Pre-Gold</b>	Kilian \$30	Blues \$30	Paso Doble \$30
<b>Gold</b>	Viennese Waltz \$35	Westminster Waltz \$35	Quickstep \$35
	Argentine Tango \$35		

**International** \_\_\_\_\_ (list) \$35 each

<b>Free Dance All Levels \$35</b>	<b>Total</b>	
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Coaches Signature \_\_\_\_\_  
(Signature indicates that the skater is prepared to test)

1. Fees include: Ice, USFSA Fees, Test expenses and Judges expenses.
2. If you are testing out of club, permission is required from your home club. Verbal or written permissions are acceptable.
3. Please mail or give me this application with your check ONE WEEK before the test date.
4. Make checks payable to: Jerry Behrens (NOT Chicago Figure Skating Club) Checks for test fees must accompany this application.
5. Send to: Jerry Behrens, Test Chairman, 24 Essex Lane, Lincolnshire, IL 60069 (847) 945-9146
6. No refunds for cancellations.