



# Chicago Figure Skating Club Singles/Pairs Test Application

Candidate Name : \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Club: \_\_\_\_\_ US Figure Skating # \_\_\_\_\_

Session Date: \_\_\_\_\_

Current level of test taking: Moves in the Field \_\_\_\_\_

Free Skating \_\_\_\_\_

Last test taken: \_\_\_\_\_ Date taken: \_\_\_\_\_

With which Club was the test taken? \_\_\_\_\_

## FEES effective May 1, 2008

**TESTING FEES:** Make test fee check payable to **Chicago Figure Skating Club**

### MOVES IN THE FIELD

- Pre-Preliminary \$8
- Preliminary \$8
- Pre-Juvenile \$8
- Juvenile \$10
- Intermediate \$12
- Novice \$12
- Junior \$15
- Senior \$15
- Out of Club Fee\*** \$10

### FREE SKATING

- Pre-Preliminary \$8
- Preliminary \$8
- Pre-Juvenile \$8
- Juvenile \$10
- Intermediate \$12
- Novice \$12
- Junior \$15
- Senior \$15
- Out of Club Fee\*** \$10

Total \$ \_\_\_\_\_

\* **Out of Club Fee** is applicable to candidates who are not a member of the Chicago FSC.

**JUDGES' FEES \$5 per skater:** Make a separate check payable to **Wendy Friedman**

**ICE TIME FEES** will be due at the rink on the day of testing.

Candidate's Signature: \_\_\_\_\_ Parent's Signature: \_\_\_\_\_

Coach's Signature: \_\_\_\_\_ Coach's telephone: \_\_\_\_\_

Parent's e-mail: \_\_\_\_\_

Coach's e-mail: \_\_\_\_\_

Please return the form with the appropriate checks to:

**Wendy Friedman, 406 Elm Dr, Wheeling IL 60090-6211**

Please contact the Test Chair ONLY via e-mail at [iceguys2@comcast.net](mailto:iceguys2@comcast.net)

A tentative test schedule will be faxed to Buffalo Grove, Glenview, and Rolling Meadows ice rinks the Monday prior to the test date.