## Glacier Falls Figure Skating Club

## **Test Application Form**

- All applications with monies required for USFS Tests to be scheduled by GFFSC must be received by the Test Chairman a minimum of three (3) weeks prior to the scheduled test session.
- Requested test dates may not be available due to the number of test requests or judge availability. If, because of Ice Time or Judge availability, it becomes necessary for the Test Chairman to postpone your test to the next available test session, no additional fees will be required.
- If the test candidate cancels or reschedules a test for ANY reason after the 3 week deadline other than a CERTIFIED injury or illness, THE TEST FEES WILL BE FORFEITED. No other excuses will be considered and the test candidate must submit a new test request and test fees to reschedule the test. This ice time has been reserved for you and cancellation deprives another skater the opportunity to test.
- Test request will not be processed without the Pro's signature on this form and check for all appropriate fees.
- If the test candidate is not a home club or second club member of GFFSC, the candidate is responsible for obtaining a letter of permission from their home club and submitting it along with this form.
- All fees for dance and pairs are PER CANDIDATE

Due to bank charges, there is a	1 \$25.0	J chai	ge to	r all r	eturne	ed ch	ecks,	tor ar	ny rea	ason.							
Your Test Chairs:				Wendy Plahy 1934 Sandalwood Ave. Fullerton, CA 92835 (714) 529-7107 wplahy@glacierfalls.com													
Test Date Requested:																	
Candidate's Name:												119	SFSA	#-			
Address:												- 00	Zi				
City:					State:												
Phone:					E-Mail:												
Home Club GFFSC?		Yes				No If "No", Home Club Name:											
Pro's Name:					Pro's Phone:												
Pro's Signature:																	
By signing this app	lication	, I, th	e abo	ve na	med	Pro, s	state t	hat th	nis ca	ndida	te ha	s dem	nonstr	rated	the rec	uisite	skills to take this test
TEST REQUESTED AND TEST FEES:	Pre- Preliminary	Preliminary	Pre-Juvenile	Juvenile	Intermediate	Novice	Junior	Senior	Pre-Bronze	Bronze	Pre-Silver	Silver	Pre-Gold	Gold	ito carota	וופווסוומו	Totals
√ Each moves in the field tes	t:																
√ Each freeskate tes																	
√ Each pairs tes	t:																
√ Each free dance tes																	
Total the indicated cost for each √ test:		\$20.00			\$30.00 \$40.00				\$20.00 \$30.00				\$40.00				
When Moves-in-the-field and F	eeskat	e test	s are	booke	ed tog	gethei	r, ded	uct 50	0% of	the F	reesl	kate p	rice.		50%		
Circle Each dance tes		DW CT RB							SD CC FiT	HH WIW TF	14S EW FT	AW T RF	K BL PD SW	VW WW AT QS	AUS R CON TR GW	MB SAM YP RW	
Enter the cost for the first dance test: \$15.00					\$25.00 \$40.00						0	\$50	.00				
Multiply cost for each additional dance tes	t:									\$5.00							
Ice & Hospitality Fee:												\$	\$20.00				
Non GFFSC member, please add:				\$50.00													
Total Fees Please submit this form along with test fees (make checks payable to GFFSC) & Enclosed: letters to the Test Chairman listed above.																	
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I certify the information above is correct and complete and have read and understood the conditions stated herein. I also understand that the test session time and judge availability is limited and that I may not be able to have all of the tests on date requested and that these tests may be rescheduled for a different date and time by the Test Chairman.

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(Club use only)				
	Date Received:	Test Date:	Test Fees Received:	