



“Granite City Basic Skills Competition”
Sunday, December 13, 2009
ENTRY FORM

Name _____ Age / DOB _____ Sex _____

Address/City/State/Zip _____

Email Address _____ Area Code/Phone # _____
(fill in if you would like to receive confirmation by email or provide a self-addressed stamped envelope)

U.S. Figure Skating # _____ Highest Level Passed _____

Home Program/Club Affiliation _____

Director’s/Instructor’s Name _____

Please circle all the event(s) you are entering: *(Fees are \$35.00 – second event \$15.00)*

<i>Compulsory Elements Basics</i>	<i>Basic (freeskate) Programs With Music Basics</i>	<i>Compulsory Elements Freeskate /Test Track</i>	<i>Basic (freeskate) Programs With Music Freeskate /Test Track</i>	<i>Well-Balanced (freeskate) Programs With Music</i>
Snowplow	Snowplow	Freeskate 1	Freeskate 1	No Test
Basic 1	Basic 1	Freeskate 2	Freeskate 2	Pre-Preliminary
Basic 2	Basic 2	Freeskate 3	Freeskate 3	Preliminary
Basic 3	Basic 3	Freeskate 4	Freeskate 4	
Basic 4	Basic 4	Freeskate 5	Freeskate 5	
Basic 5	Basic 5	Freeskate 6	Freeskate 6	
Basic 6	Basic 6	Ltd Beginner	Ltd Beginner	
Basic 7	Basic 7	Beginner	Beginner	
Basic 8	Basic 8	No Test	No Test	
		Pre-Pre	Pre-Pre	
		Preliminary	Preliminary	

The completed entry forms in their entirety with certified signatures (on reverse of this form) and fees must be postmarked no later than Saturday, November 14, 2009.

Make check or money order payable to **SCFSC** and mail to:

**Lori Stuart, 1238 7th Ave. N,
 Sauk Rapids, MN 56379**

For additional information contact: Lori Stuart @ 320-260-2285 or loristuart@clearwire.net

ENTRY FEES ARE NOT REFUNDABLE AFTER THE ENTRY DEADLINE UNLESS AN EVENT IS CANCELED. THERE WILL BE A \$20 CHARGE FOR ALL RETURNED CHECKS.

First Event \$35	\$ _____
Second Event \$15	\$ _____
Practice Ice (cost per form)	\$ _____
<input type="checkbox"/> Please Enter me in the Central MN Basic Skills Competition Series \$15	\$ _____
Late Fee \$15 (if mailed after 11/14/09)	\$ _____
Total:	\$ _____

All applicable fees must accompany this application

Keep a copy of this form and mail original to address above postmarked no later than Saturday, November 14, 2009

CERTIFICATION OF COMPETITOR:

The undersigned approves the competitor is eligible to enter the events checked and agrees to hold harmless the USFS, the St. Cloud Figure Skating Club, MAC Arena, and all of their employees and agents from any and all loss, damage and/or injury that may be sustained by the entrant in any manner during Practice Ice or while participating in any activities of this Competition.

I agree, in accordance with the USFS Rulebook, entry fees are not refundable after the close of entries unless no competition exists in a particular division.

I hereby grant the right and authority to photograph, film and/or record vocally my skater for promotional or publicity purposes and I understand that these images and names might be used in print media publications, advertisements, online and other formats.

I also understand that the competition committee reserves the right to limit the number of entries in any event or if required eliminate an event or events due to time constraints. I agree that if my application is incomplete, I will accept a collect telephone call to supply additional information.

I agree to conduct myself, both on and off the ice, in a manner that will reflect favorably upon the competition and upon the sport of figure skating and that is consistent with the high standards of the sport. I agree to respect the person and property of other skaters.

Parent/Guardian Signature _____ Date _____

Competitor Signature _____ Date _____

Instructor/Coach Signature _____ Date _____

(or Program Director/Club Officer)

Instructor/Coach E-mail / Phone Contact: _____

(or Program Director/Club Officer)

PRACTICE ICE:

Practice Ice sessions are 20-minutes in length and cost \$8.00 per session. Practice Ice will be available Saturday evening and Sunday morning. (Saturday evening options will be cancelled if a minimum of 18 skaters are not signed up in advance.) Practice Ice must be paid for in advance and no more than two (2) 20-minute sessions on Saturday evening and one (1) 20-minute session on Sunday morning may be reserved in advance.

Saturday Evening Options ~ December 12th – Between 7:30 p.m. and 8:30 p.m.

I would like 1 session – 20 minutes of practice ice on Saturday Evening, December 12th for a cost of \$8; between 7:30 p.m. and 8:30 p.m.

I would like 2 sessions – 40 minutes of practice ice on Saturday Evening, December 12th for a cost of \$16; between 7:30 p.m. and 8:30 p.m.

I would be interested in an additional 20 minute session of practice ice on Saturday Evening, December 12th for a cost of \$8; between 7:30 p.m. and 8:30 p.m. if available for pre-registration cost of \$8. (if checked you will be contacted by email after the registration deadline to confirm your participation)

Sunday Morning Option ~ December 13th – Between 8:30 a.m. and 10:30 a.m. Prior to Competition

I would like 1 session – 20 minutes of practice ice on Sunday Morning, December 13th for a cost of \$8 between 8:30 a.m. and 10:30 a.m.

Once all practice ice has been scheduled, additional ice will be available first-come, first-serve basis at registration at a cost of \$8.00 per 20-minutes. No refunds will be given for unused sessions.

INCLUDE THIS COMPLETED PAGE WITH ENTRY FORM

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