

**Shaker Figure Skating Club
Test Application**

Name _____ USFSA# _____
 Address _____ City/State/Zip _____
 Phone _____ Email _____
 Home Club _____

Please Note: Home club applications take precedence over out-of-club applications. If Shaker is not your home club, permission to test is required from your home club.

Have you taken this test before? _____ When? _____

Skaters must wait a minimum of twenty-seven (27) days before re-trying any test.

Free Skate

_____ Pre-Preliminary (\$15)
 _____ Preliminary (\$20)
 _____ Pre-Juvenile (\$25)
 _____ Juvenile (\$25)
 _____ Intermediate (\$30)
 _____ Novice (\$35)
 _____ Junior (\$40)
 _____ Senior (\$45)

Moves in the Field

_____ Pre-Preliminary (\$15)
 _____ Preliminary (\$20)
 _____ Pre-Juvenile (\$25)
 _____ Juvenile (\$25)
 _____ Intermediate (\$30)
 _____ Novice (\$35)
 _____ Junior (\$40)
 _____ Senior (\$45)

Pairs (per tester)

_____ Pre-Juvenile (\$15)
 _____ Juvenile (\$20)
 _____ Intermediate (\$25)
 _____ Novice (\$30)
 _____ Junior (\$35)
 _____ Senior (\$45)

Dance

Preliminary
 _____ Dutch Waltz (\$6)
 _____ Canasta Tango (\$6)
 _____ Rhythm Blues (\$6)

Dance

Pre-Bronze
 _____ Swing Dance (\$7)
 _____ Cha Cha (\$7)
 _____ Fiesta Tango (\$7)

Bronze

_____ Hickory Hoedown (\$8)
 _____ Willow Waltz (\$8)
 _____ Ten Fox (\$8)

Pre-Silver

_____ Fourteen Step (\$10)
 _____ European Waltz (\$10)
 _____ Foxtrot (\$10)

Silver

_____ American Waltz (\$12)
 _____ Tango (\$12)
 _____ Rocker Foxtrot (\$12)

Pre-Gold

_____ Starlight Waltz (\$15)
 _____ Kilian (\$15)
 _____ Blues (\$15)
 _____ Paso Doble (\$15)

Gold

_____ Viennese Waltz (\$20)
 _____ Westminster Waltz (\$20)
 _____ Quickstep (\$20)
 _____ Argentine Tango (\$20)

Dance

International (\$20.00 Each)

Specify:

1. _____
 2. _____

Free Dance

_____ Juvenile (\$10)
 _____ Intermediate (\$10)
 _____ Novice (\$15)
 _____ Junior (\$15)
 _____ Senior (\$20)

Partner _____

Please Check Choice of Test:

Standard _____ Adult _____

Master _____ Solo _____

Other Test (Specify)

Test Fees	
Total for all tests	_____
Ice fee (per skater)	_____ \$5.00
Total enclosed	_____

Skaters: If you would like successful test results reported to your school, please list your school name, complete address and principal's name: _____

Signatures

Applicant _____
 (Parent or guardian signature if applicant is a minor)

Coach _____

Test Chair _____
 (Or Club Officer, only necessary if Shaker is not your home club)

Title _____

Application deadline is 6:00pm, ten days prior to the test date. Applications received after the deadline are accepted at the discretion of the Test Chair, and require a **\$20 late fee.**

Make checks payable to: **Shaker Figure Skating Club**

Applications may be left in the SFSC mailbox at Thornton Park or mailed directly to the Test Chair: Carla Cegielski
 3321 New York Ave.
 Perry, OH 44081