

Ames/Des Moines Figure Skating Club Test Application

Test Date: Saturday, March 20, 2010

Test Session will be held at the Ames Ice Arena

Name	USFSA#	Date of Birth
Address	Home Phone	
City, State, Zip	Home Club	
Skater's Email Address	Coach's Phone Number	
Coach's Name	Coach's Email Address	

Please check the test you plan to take:

MOVES IN THE FIELD			Date last attempted:		
	Pre-Preliminary	\$30.00		Intermediate	\$50.00
	Preliminary	\$35.00		Novice	\$55.00
	Pre-Juvenile	\$40.00		Junior	\$60.00
	Juvenile	\$45.00		Senior	\$65.00
FREESTYLE			Date last attempted:		
	Pre-Preliminary	\$30.00		Intermediate	\$50.00
	Preliminary	\$35.00		Novice	\$55.00
	Pre-Juvenile	\$40.00		Junior	\$60.00
	Juvenile	\$45.00		Senior	\$65.00
ADULT TESTS			Date last attempted:		
	Pre-Bronze Moves	\$30.00		Pre-Bronze Free Skate	\$30.00
	Bronze Moves	\$40.00		Bronze Free Skate	\$40.00
	Silver Moves	\$50.00		Silver Free Skate	\$50.00
	Gold Moves	\$65.00		Gold Free Skate	\$65.00
PAIRS		Date last attempted:		Partner and USFSA #:	
	Preliminary	\$40.00		Novice	\$55.00
	Juvenile	\$45.00		Junior	\$60.00
	Intermediate	\$50.00		Senior	\$65.00

This application must be delivered to the Test Chair by the test session closing date March 13, 2010.

This application is not valid unless signed where indicated and test fees attached. Late entries will be accepted on a space-available basis. *Test fees will not be returned after the test session closing date, if the test is not taken for any reason (including medical). There will be no refund if you do not pass the moves in the field test and have applied for the corresponding freestyle test.* The tester must be a USFS member. **Note:** If you are a USFS member with a club other than the host club, please have your home club's test chair complete a letter of permission verifying your test level and granting permission to test. If you wish successful test results reported to your school, please list your school name, complete address and principal's name on the back of this form. **Please be at the testing site at least 30 minutes prior to scheduled test time.** Time schedule of tests will be posted at the rink approximately one week prior to the test date. Non-club members will be notified by e-mail or telephone.

TOTAL FOR TESTS REQUESTED	\$ _____
NON-DMFSC or NON-AMES FSC APPLICANTS (add \$15)	\$ _____
TOTAL:	\$ _____

Signature of skater or parent (if skater under 18) _____
 Coach's signature _____

Please mail the application and check made payable to DMFSC to Karen Teel, 6100 Sharon Circle, Urbandale, IA, 50322. For questions, contact Karen Teel at (515) 252-0882 or email hkzateel@msn.com, or Amy Scherer at (515) 440-0772 or email avscherer@gmail.com. Revjoelle@aol.com (Ames Figure Skating Club) 515-388-4462