# Skokie Valley Skating Club
# Singles/Pairs Test Application

Test Date Requested _____
Must be postmarked 21 days prior to test date

Name _____ USFS#_____
Address _____ Check One:
City/State/Zip _____ ___ SVSC Home Club Member
Phone # _____ ___ Individual USFS Member
E-mail _____ ___ _____
List Home Club & attach letter of permission

Signature _____ Parent/Guardian _____
Coach Name_____ Coach Phone # _____
Coach Signature _____ Coach E-Mail_____
Signature indicates approval for skater to take test

| | Test Level | MIF | F/S |
|---|---|---|---|
| | Pre-Preliminary | $20 | $!5 |
| | Preliminary | $25 | $25 |
| | Pre-Juvenile | $35 | $30 |
| | Juvenile | $30 | $30 |
| | Intermediate | $35 | $35 |
| | Novice | $40 | $35 |
| | Junior | $45 | $40 |
| | Senior | $45 | $40 |
| | | | |
| | **ADULT** | | |
| | Pre-Bronze | $30 | $25 |
| | Bronze | $35 | $30 |
| | Silver | $35 | $30 |
| | Gold | $40 | $35 |

**Test(s) to be taken**:

_____ **$** _____
_____ **$** _____
**Out-Of- Club Fee $20** **$** _____
**(If applicable)**
**TOTAL DUE** **$** _____

**Make check payable to**:
Skokie Valley Skating Club

**Mail Application and Check To**:
Mrs. Judith O'Shea
1022 Portsmouth Circle
Gurnee, IL 60031-4024
847/855-1942
oshea61@comcast.net

Please fill out this M/FS application form completely and please print neatly and legibly. Incomplete forms will not be accepted. All applications must be approved and signed by Coach. If candidate is under 18 years of age, form must be signed by parent/guardian.

Test fees include all costs: ice, judges, hospitality, and USFS fees.

Completed application/permission letter/and payment must be submitted 21 days prior to test date.

Cancellations after 7 days prior to tests will forfeit test fees.

Test schedule will be posted at: www.skokievalleyskatingclub.com 5 to 7 days for the test session. Please do not make scheduling inquiries prior to that time.

*For office use only:*

| | | | |
|---|---|---|---|
| Postmark: | | Membership verified | |
| Check # | | Qualifying Tests checked | |
| Check Amount: | | Moves | |
| Letter of Permission | | F/S | |