



Casper Figure Skating Club (CFSC) Test Application Due 01/21/2022

2022

Skater's Name _____ Skater's USFSA #: _____
 Email Address: _____ Phone Number _____
 Address: _____
 City State Zip: _____

Please select the test(s) you wish to take. If requesting more than one test, please number with your order of preference.

| <i>SINGLES</i> | | |
|------------------------|----------------------------------|----------------------------------|
| Level | Moves | Free Skating |
| Pre-preliminary* | \$43.00 <input type="checkbox"/> | \$25.00 <input type="checkbox"/> |
| Preliminary | \$45.00 <input type="checkbox"/> | \$25.00 <input type="checkbox"/> |
| Pre-Juvenile | \$45.00 <input type="checkbox"/> | \$25.00 <input type="checkbox"/> |
| Juvenile | \$45.00 <input type="checkbox"/> | \$25.00 <input type="checkbox"/> |
| Intermediate | \$50.00 <input type="checkbox"/> | \$30.00 <input type="checkbox"/> |
| Novice | \$52.00 <input type="checkbox"/> | \$30.00 <input type="checkbox"/> |
| Junior | \$54.00 <input type="checkbox"/> | \$30.00 <input type="checkbox"/> |
| Senior | \$56.00 <input type="checkbox"/> | \$30.00 <input type="checkbox"/> |
| Adult Pre-Bronze | \$43.00 <input type="checkbox"/> | \$25.00 <input type="checkbox"/> |
| Adult Bronze | \$43.00 <input type="checkbox"/> | \$25.00 <input type="checkbox"/> |
| Adult Silver | \$50.00 <input type="checkbox"/> | \$30.00 <input type="checkbox"/> |
| Adult Gold | \$50.00 <input type="checkbox"/> | \$30.00 <input type="checkbox"/> |
| *\$50 for taking both. | | |

Test Fee _____ *** Skaters who drop tests after deadline forfeit fee, unless due to an illness or injury.
 Administrative Fee \$5.00
 Non-Member Fee _____ Non-Members of CFSC **must pay a \$25.00 fee and provide a letter of permission.**
 Late Fee (if App) _____ If submitted after the deadline *****will require*** at \$20.00 late fee**
 Total Due _____ Please make checks payable to CFSC or we accept Venmo for electronic payment

Applicant's signature: _____ Parent's signature if under 18 _____

COACH USE ONLY

I, _____, verify that I am in compliance with USFSA Coaches requirements.

The Coach attending the test session with skater is _____.

Signature: _____ USFSA#: _____ Email: _____

**Make sure this application is complete, with all fees stapled to it.
 Fees must be attached in order to be placed on the schedule. Thank you!**
 Mail to: Casper Figure Skating Club – PO Box 50688 – Casper, WY 82605
 Questions? Send them to: CasperFSC@gmail.com or 307-259-7281 Abby