

## **Qualifying Level Critique FORM**

May 4-5, 2019

Deadline April 10th, 2019

Skater Name:			Phone #				
Address:			City, State, Zip:				
Home Club:		USFS #	Email:	Email:			
		Please chec	k the test request:				
FREE SKATE Program			SHORT Program				
Juvenile Intermediate Novice Junior Senior	\$50 □ \$50 □ \$50 □ \$50 □	SHORT & FRE Juvenile Intermediate Novice Junior Senior	Juvenile Intermediate Novice Junior Senior  E SKATE  \$75 \[ \] \$75 \[ \] \$75 \[ \] \$75 \[ \] \$75 \[ \] \$75 \[ \] \$75 \[ \] \$75 \[ \]		\$50 □ \$50 □ \$50 □ \$50 □ \$50 □		
		Schol	<b>L</b> 610		FREE SKA Γ& FREE S	RT Fee:\$ TE Fee:\$ SKATE:\$ nclosed:\$	
Signature of skater	or parent if u	ınder 18:	(			Credit Card □	
Coach Name :		Si	gnature:				
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There will be no refund for critique unless cancelled by Competition Chair.

Competition Chair - Alena Lunin <u>alunin@icesports.com</u>

## Mail Form to:

SportONE Parkview Icehouse Atten: Alena Lunin 3869 Ice Way Fort Wayne, IN 46805