

If the AFSC is not your home club, please complete section below or
enclose a separate letter of permission from your home club.

PERMISSION TO TEST: *To be completed by a home club official, if AFSC is not your home club.*

_____ is a member in good standing of the _____
and has permission to test at the Aviator Figure Skating Club's Test Session on the above date.

Name of Official (*Print*) _____ Title: _____

Signature _____ Date: _____

THIS APPLICATION IS NOT VALID UNLESS SIGNED WHERE INDICATED

*The time of your test will be posted at the rink 4 days prior to the scheduled test date. Please be at the rink at least **1 hour** before your scheduled test time. Test fees **WILL NOT** be returned if test applied for is not taken (medical emergencies excluded).*

We recommend that you schedule the same level Moves and Free on different test sessions. If there is one test contingent upon another, the second test will always be placed on the wait list. The testing fee will not be refunded. Please review TR 20.0 through TR 39.09 for USFSA requirements to pass tests. If the skater scratches, the test chairman must be notified 48 hours prior; otherwise all fees will be forfeited (medical emergencies excluded). Only two postponements can be accepted.

AFSC reserves the right to increase the test fee paid by those skaters testing. This increase may be necessary to cover the purchase of non-club ice or to bring in Gold level judges.

AFSC reserves the right to change testing sessions date and or time.

Please note: the following waiver MUST be signed*

WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT ("AGREEMENT")

In consideration of participating in Aviator Figure Skating Club Activities, I represent that I understand the nature of figure skating activities ("activity") and that I am qualified, in good health and in proper physical condition to participate in such "activity". I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the "activity".

I fully understand that this "activity" involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by own actions, or inactions, those of others participating in the "activity", the conditions in which the activity takes place, or the negligence of the "releases" named below; that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in the "activity".

I hereby release, discharge, and covenant not to sue the *Aviator Figure Skating Club*, United States Figure Skating, it's directors, officers, administrators, sponsors, volunteers, agents, employees, staff, instructors, trainers, other participants, if applicable, owners, lessors of premises on which "activity" takes place (each considered one of the Releases herein) from all liability, claims, demands, losses, the damages on my account caused or alleged to be caused in whole or in part by the negligence of the "releases" or otherwise, including negligent rescue operation; and I further agree that if, despite this release, waiver of liability, and assumption of risk, I, or anyone on my behalf, makes a claim against any of the Releases, that I will indemnify, save and hold harmless each of the releases from any loss, liability, damage, or cost which any may incur as the result of such claim.

The *Aviator Figure Skating Club* has the right, but not the obligation, to provide rules, regulations and/or ice monitors for the Club Ice. We hereby acknowledge that the *Aviator Figure Skating Club* shall not be responsible for the supervision of the members on the Ice.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have freely and without inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect. I have also read and agree to follow the ice rules posted at the Rink's Entryway.

Printed Name of Participant _____ If under 18 yrs-old, Print Name of the Legal Guardian

Address _____ Phone # _____

Signature of Participant (age 18 or over) or a guardian _____ Date _____

◀ **The USFSA and its Member Clubs undertake NO responsibility for damages or injuries during Club Tests**