

Athlete's Name:				
Athlete's USFS member #:				
Parent name, if under 18:				
E-mail contact:				
Phone contact:				
Coach's Name:				
Coach's E-mail:				
Coach's Phone:				
I verify that the athlete listed above is eligible to receive Test Credit through IJS protocol. I have seen the unaltered and correct scores, which match the protocol the athlete is submitting. I understand that altering a protocol sheet to meet the test requirement is considered an ethics violation of U.S. Figure Skating and The Professional Skaters Association.				
Coach's signature:				
Name of competition:				
Date of competition:				

Please attach to this form:

- 1. The overall event results, which include the names and signatures of the Event Referee and Technical Controller.
- 2. Your individual protocol.
- 3. Your Test Credit Skater report from the competition.
- 4. Processing Fee (prices are Per test & Per Skater).
- 5. Allow at least 2 weeks for results to be recorded if mailing the form.
- 6. Indicate below which test you are applying for:

SINGLES FREE SKATE TESTS		PAIRS TESTS		DANCE TESTS	
Juvenile (\$ 15)		Juvenile (\$ 15)		Juvenile (\$ 15)	
Intermediate (\$15)		Intermediate (\$15)		Intermediate (\$15)	
Novice (\$15)		Novice (\$15)		Novice (\$15)	
Junior (\$15)		Junior (\$15)		Junior (\$15)	
Senior (\$15)		Senior (\$15)		Senior (\$15)	
Adult Gold (\$15)					

You may leave all forms and payment in the Club Box at Toyota Sports Center

or Mail to: Ann Jensen Test Chair, FSCSC 6853 Encino Ave. Van Nuys, Ca 91406 <u>annmjensen@aol.com</u> 310.849.9550 (cell/text)

Forms missing any paperwork or signatures will be returned unprocessed. Payment will be kept as a handling fee. When forms are re-submitted they <u>will require another processing</u> <u>fee to be submitted with them.</u> NO REFUNDS OR CHANGES