



Performance Affidavit for Virtual Test Submission

This form must be completed by the athlete (s) submitting a video for virtual test credit, in addition to their coach, the videographer, and the proctor on the day of the performance. In completing this form, all parties certify all information on this form is accurate and all rules of Virtual Testing were abided by. (Videographer and proctor do not need to be U.S. Figure Skating members.)

Athlete Information

NAME:	U.S. FIGURE SKATING #:
EMAIL ADDRESS:	PHONE:
TESTS SUBMITTED:	

Recording Details

AREA RINK:	AREA RINK CITY, STATE:
RECORDING DATE:	RECORDING TIME:

Athlete Signature

_____	<input type="checkbox"/> I certify that the recording submitted was recorded on the date and time above. I further attest that the performance was one continuous program and not edited prior to submission.
-------	---

Coaches Information

NAME:	U.S. FIGURE SKATING #:
EMAIL ADDRESS:	PHONE:

Coaches Signature

_____	<input type="checkbox"/> I certify that the recording submitted was recorded on the date and time above. I further attest that the performance was one continuous program and not edited prior to submission.
-------	---

Videographer Information

NAME:	U.S. FIGURE SKATING #:
EMAIL ADDRESS:	PHONE:

Videographer Signature

_____	<input type="checkbox"/> I certify that the recording submitted was recorded on the date and time above. I further attest that the performance was one continuous program and not edited prior to submission.
-------	---

Proctor Information

NAME:	U.S. FIGURE SKATING #:
EMAIL ADDRESS:	PHONE:

Proctor Signature

_____	<input type="checkbox"/> I certify that the recording submitted was recorded on the date and time above. I further attest that the performance was one continuous program and not edited prior to submission.
-------	---