



Yarmouth Ice Club Second Annual
"Skate Your Dream"
Basic Skills Competition
Monday, January 16, 2012 (8 AM to 1 PM)
The Bog Ice Arena, 188 Summer St. Kingston, MA
USFS Basic Skills Approved

Last Name _____ First Name _____ Sex _____
 Address _____ City _____
 State _____ Zip _____ Email Address _____
 Area Code/Phone _____ Birth Date _____
 US Figure Skating Membership Number _____ Highest Basic Skills Level Passed _____
 Highest US Figure Skating Tests Passed: MITF _____ Free Skate _____ Dance _____
 (no higher than PRE)
 Program Affiliation _____ Instructor's Name _____

Please check the event(s) you are entering:

PROGRAMS WITH NO MUSIC

Basic Elements Event	Free Skate 1-6 Compulsory Event	Compulsory (Test Track and Well Balanced Levels)
Snowplow Sam/Tots: ___ Basic 5: ___	Free Skate Level 1 Compulsory: ___	Limited Beginner Compulsory: ___
Basic 1: ___ Basic 6: ___	Free Skate Level 2 Compulsory: ___	Beginner Compulsory: ___
Basic 2: ___ Basic 7: ___	Free Skate Level 3 Compulsory: ___	No Test Compulsory: ___
Basic 3: ___ Basic 8: ___	Free Skate Level 4 Compulsory: ___	Pre-Preliminary Compulsory: ___
Basic 4: ___	Free Skate Level 5 Compulsory: ___	Preliminary Compulsory: ___
	Free Skate Level 6 Compulsory: ___	

PROGRAMS WITH MUSIC

Basic Program Event	Free Skate 1-6 Program Event	Test Track Programs	Well Balanced Programs	Adult:
Snowplow Sam/Tots: ___	Free Skate 1: ___	Limited Beginner: ___	No Test Free Skate: ___	Adult Basic 1: ___
Basic 1: ___	Free Skate 2: ___	Beginner: ___	Pre-Preliminary Free Skate: ___	Adult Basic 2: ___
Basic 2: ___	Free Skate 3: ___	Pre-Preliminary Test: ___	Preliminary Free Skate: ___	Adult Basic 3: ___
Basic 3: ___	Free Skate 4: ___	Preliminary Test: ___		Adult Basic 4: ___
Basic 4: ___	Free Skate 5: ___			Adult Pre-Bronze: ___
Basic 5: ___	Free Skate 6: ___			Adult Bronze: ___
Basic 6: ___				
Basic 7: ___				
Basic 8: ___				

SHOWCASE: Please indicate skater test level:

ENTRY FEE IS \$45.00 FOR THE FIRST EVENT AND \$25.00 FOR EACH ADDITIONAL EVENT.

First Event	\$	45.00
# _____ Additional Events @\$25.00	\$	_____
Late fee \$15.00 (if applicable)	\$	_____
Total:	\$	_____

ENTRY FEES NOT REFUNDABLE AFTER DEADLINE UNLESS AN EVENT CANCELLED OR DOCUMENTED MEDICAL REASON.

The completed entry form, with fees, must be postmarked **no later than December 23, 2011**. Make check or money order payable to "Yarmouth Ice Club" and mail to 20 Summer Heights Drive, Franklin, MA, 02038. For additional information call Paul Crugnola @ 612-860-9554 or email @ paul.crugnola@gmail.com.

Certification of Competitor: The Competitor is eligible to enter the events checked. It is agreed that the competitor and family holds The Yarmouth Ice Club harmless from any and all liability either during practice or the competition, and from any and all liability for damages to or loss of property.

Competitor Signature _____ **Date** _____
Parent/Guardian Signature _____ **Date** _____
Instructor Signature _____ **Date** _____
Program Director/Club Officer _____ **Date** _____