

Commonwealth Figure Skating Club
OPEN TEST APPLICATION



Please type or print neatly:

Test Session Date: _____
 Skater Name: _____
 Skater's USFS #: _____ Phone: _____
 Street Address: _____
 City: _____ State: _____ Zip Code: _____

Most-Recent Test History:

MIF Passed: _____ Date: _____ FS Passed: _____ Date: _____
 MIF Failed: _____ Date: _____ FS Failed: _____ Date: _____

Signature: _____
 (Parent or Adult Skater)
 Printed Name: _____
 E-Mail: _____
 Phone: _____

Signature: _____
 (Coach)
 Printed Name: _____
 E-Mail: _____
 Phone: _____
 USFS #: _____

**Rule MR 5.10 requires coach to be USFS-registered.*

Please circle all tests to be taken. Adult & Dance tests are available upon request.

Moves in the Field	CFSC Member	Non-Member	Freestyle	CFSC Member	Non-Member
Pre-Preliminary	\$50.00	\$65.00	Pre-Preliminary	\$50.00	\$65.00
Preliminary	\$50.00	\$65.00	Preliminary	\$50.00	\$65.00
Pre-Juvenile	\$50.00	\$65.00	Pre-Juvenile	\$50.00	\$65.00
Juvenile	\$60.00	\$75.00	Juvenile	\$60.00	\$75.00
Intermediate	\$60.00	\$75.00	Intermediate	\$60.00	\$75.00
Novice	\$60.00	\$75.00	Novice	\$60.00	\$75.00
Junior	\$60.00	\$75.00	Junior	\$60.00	\$75.00
Senior	\$60.00	\$75.00	Senior	\$60.00	\$75.00

Club Permission:

This is to certify that _____ is a member in good standing of
 (skater name)
 _____ for the _____ — _____ year and has permission to test.
 (skater's club name) membership year

~*~*~ **SEND APPLICATION TO:** ~*~*~
 Rachel Pauli
 70 Dean Rd
 Milton, MA 02186
\$35 Late fee will be charged for all applications RECEIVED after the deadline. The deadline is TWO WEEKS PRIOR to the test date

Signature: _____
 (Skater's Club Test Chair)
Printed Name: _____
E-Mail: _____
Phone: _____