

# 2010 ISI DISTRICT III CHAMPIONSHIPS

April 10 & 11 Floyd Hall Arena, Little Falls, New Jersey

APPLICATION DEADLINE: MARCH 24, 2010

Individual Entry Form (please print CLEARLY)

Name: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ (as of 4/10/10)

Street Address: \_\_\_\_\_ Birthdate(MM/DD/YY) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Team Representing: \_\_\_\_\_

Are you a full time college student? If yes, school attending? \_\_\_\_\_

ISI # \_\_\_\_\_ ISI Test Levels (as of 3/10/10): \_\_\_\_\_ USFS Freestyle Level \_\_\_\_\_

→Are you an active USFS member who has competed at or above the Novice level at any USFS National Championship within the last two years? YES NO (please circle one)

<b><u>Pre-Alpha – Delta</u></b> <input type="checkbox"/> Program <input type="checkbox"/> Stroking <input type="checkbox"/> Solo Compulsories <input type="checkbox"/> Interpretive <b><u>Spotlight</u></b> <input type="checkbox"/> Character <input type="checkbox"/> Light Entertainment _____ Level
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<b><u>Freestyle 1 – 10</u></b> <input type="checkbox"/> Program <input type="checkbox"/> Footwork <input type="checkbox"/> Artistic <input type="checkbox"/> Stroking <input type="checkbox"/> Solo Compulsory <input type="checkbox"/> Interpretive <input type="checkbox"/> Ultimate <b><u>Spotlight</u></b> <input type="checkbox"/> Character <input type="checkbox"/> Light Entertainment _____ Level
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<b><u>Figures</u></b> <input type="checkbox"/> Figures <input type="checkbox"/> Creative Figures _____ Level
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<b><u>Tots</u></b> <input type="checkbox"/> Program <input type="checkbox"/> Stroking <input type="checkbox"/> Solo Compulsories _____ Level
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<b><u>Open Freestyle</u></b> _____ Level <b><u>Solo Dance 1 - 10</u></b> _____ Level
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<b><u>Couples</u></b> <input type="checkbox"/> Program _____ Level <input type="checkbox"/> Spotlight High (Freestyle 6 – 10) <input type="checkbox"/> Spotlight Intermediate (Freestyle 4 – 5) <input type="checkbox"/> Spotlight Medium (Freestyle 1 – 3) <input type="checkbox"/> Spotlight Low (Alpha - Delta) _____ Partner
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<b><u>Jump &amp; Spin Teams</u></b> <input type="checkbox"/> Low (Pre-Alpha-Delta) <input type="checkbox"/> Med (Freestyle 1 – 3) <input type="checkbox"/> Int (Freestyle 4 – 5) <input type="checkbox"/> High (FS 6 – 10) _____ Partner
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<b><u>Created Events</u></b> <input type="checkbox"/> Rhythmic Spotlight <input type="checkbox"/> Dance Step Event <input type="checkbox"/> Sit Spin Challenge <input type="checkbox"/> Surprise <input type="checkbox"/> Couples Interpretive <b><u>Partner / Prop:</u></b> =====
<b><u>Hockey Events</u></b> <input type="checkbox"/> Skating <input type="checkbox"/> Passing & Shooting _____ Level

**Entry Fees:** First Event: \$75; Additional Events: \$20 each

**Amount Enclosed:** \_\_\_\_\_

I skate in this event(s) at my own risk for (name of team) \_\_\_\_\_ and hereby release ISI, MIRMA, The Floyd Hall Arena and their personnel and members from all liability.

**Signature of Skater** \_\_\_\_\_ **Signature of Parent or Guardian** \_\_\_\_\_

I declare that the above information is true, that this skater's tests are registered with ISI and that this skater is a current ISI Individual Member and is skating in the correct categories and levels.

**Coach's name:** \_\_\_\_\_ **Signature of Coach** \_\_\_\_\_  
(required)

**Coach's Phone number:** (\_\_\_\_) \_\_\_\_\_ **Coach's E-mail:** \_\_\_\_\_

Please make checks payable to: MIRMA and Mail with entry form to:

**MIRMA, c/o Wonderland of Ice. 123 Glenwood Avenue, Bridgeport, CT 06610**