

**HOLLYDELL FIGURE SKATING CLUB TEST APPLICATION**  
**TEST DATE: March 9, 2010 9:00 AM – 4:00 PM**

<b>Candidate's Name:</b>	<b>D.O.B.</b>	<b>USFSA #:</b>
<b>Street Address:</b>	<b>Telephone:</b>	
City: _____ State: _____ Zip: _____	<b>e-mail:</b>	
<b>Highest Test Passed:</b>	<b>Home Club:</b>	
<b>FS</b> <b>Moves</b> <b>Dance</b> <b>Pairs</b>		
<b>Partner's Name:</b>	<b>Partner's USFSA #:</b>	
<b>Primary Coach: (print):</b>	<b>Signature (Parent if Under 18):</b>	
<b>Signature:</b> _____	<b>USFS Registration No.:</b> _____	

**CHECK THE FOLLOWING AS REQUIRED:**

<u>MOVES IN THE FIELD</u>	<u>FEE</u>	<u>FREE SKATING</u>	<u>FEE</u>	<u>PAIRS (per skater)</u>	<u>FEE</u>
<input type="checkbox"/> PRE-PRELIMINARY	\$20	<input type="checkbox"/> PRE-PRELIMINARY	\$18	<input type="checkbox"/> PRELIMINARY	\$15 -\$7 2 <sup>nd</sup> candidate
<input type="checkbox"/> PRELIMINARY	\$24	<input type="checkbox"/> PRELIMINARY	\$22	<input type="checkbox"/> JUVENILE	\$18 -\$9 2 <sup>nd</sup> candidate
<input type="checkbox"/> PRE-JUVENILE	\$27	<input type="checkbox"/> PRE-JUVENILE	\$25	<input type="checkbox"/> INTERMEDIATE	\$24 -\$12 2 <sup>nd</sup> candidate
<input type="checkbox"/> JUVENILE	\$28	<input type="checkbox"/> JUVENILE	\$26	<input type="checkbox"/> NOVICE	\$30 -\$15 2 <sup>nd</sup> candidate
<input type="checkbox"/> INTERMEDIATE	\$33	<input type="checkbox"/> INTERMEDIATE	\$31	<input type="checkbox"/> JUNIOR	\$40 -\$20 2 <sup>nd</sup> candidate
<input type="checkbox"/> NOVICE	\$35	<input type="checkbox"/> NOVICE	\$33	<input type="checkbox"/> SENIOR	\$50 -\$25 2 <sup>nd</sup> candidate
<input type="checkbox"/> JUNIOR	\$38	<input type="checkbox"/> JUNIOR	\$36		
<input type="checkbox"/> SENIOR	\$45	<input type="checkbox"/> SENIOR	\$42		

<u>DANCE</u>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PRELIMINARY	\$12 ea.	<input type="checkbox"/> DW	<input type="checkbox"/> CT	<input type="checkbox"/> RB				
PRE-BRONZE	\$13 ea.	<input type="checkbox"/> SD	<input type="checkbox"/> CC	<input type="checkbox"/> F T				
BRONZE	\$15 ea.	<input type="checkbox"/> HH	<input type="checkbox"/> WW	<input type="checkbox"/> TF				
PRE-SILVER	\$20 ea.	<input type="checkbox"/> EW	<input type="checkbox"/> FT	<input type="checkbox"/> 14S				
SILVER	\$25 ea.	<input type="checkbox"/> AW	<input type="checkbox"/> RF	<input type="checkbox"/> T				
PRE-GOLD	\$30 ea.	<input type="checkbox"/> PD	<input type="checkbox"/> K	<input type="checkbox"/> BL				
GOLD	\$35 ea.	<input type="checkbox"/> QS	<input type="checkbox"/> VW	<input type="checkbox"/> AT	<input type="checkbox"/> WW			
INTERNATIONAL	\$45 ea.	<input type="checkbox"/> R	<input type="checkbox"/> SW	<input type="checkbox"/> CON	<input type="checkbox"/> AUS			
		<input type="checkbox"/> YP	<input type="checkbox"/> TR	<input type="checkbox"/> SAM	<input type="checkbox"/> GW	<input type="checkbox"/> RW		

<u>FREE DANCE (per skater)</u>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JUVENILE	\$12	<input type="checkbox"/>			
INTERMEDIATE	\$15	<input type="checkbox"/>			
NOVICE	\$22	<input type="checkbox"/>			
JUNIOR	\$30	<input type="checkbox"/>			
SENIOR	\$35	<input type="checkbox"/>			

<u>ADULT</u>	<u>MiF</u>	<u>FS</u>	
PRE-BRONZE	<input type="checkbox"/>	<input type="checkbox"/>	\$20 ea
BRONZE	<input type="checkbox"/>	<input type="checkbox"/>	\$25 ea.
SILVER	<input type="checkbox"/>	<input type="checkbox"/>	\$30 ea.
GOLD	<input type="checkbox"/>	<input type="checkbox"/>	\$40 ea.

**\*\*\*APPLICATION DEADLINE is February 28, 2010\*\*\***

LATE APPLICATIONS WILL BE ACCEPTED AT THE DISCRETION OF THE TEST COMMITTEE AND IF TIME PERMITS--**A \$15 LATE FEE SHALL APPLY.** THERE WILL BE NO REFUND OF TEST FEES UNLESS THE TEST SESSION IS CANCELED OR JUDGES CANNOT BE OBTAINED FOR A PARTICULAR TEST. ALL FEES MUST ACCOMPANY THE APPLICATION. **SPACE IS LIMITED—APPLY EARLY—Once the ice time is filled, Hollydell FSC reserves the right to mark all other applications "return to sender".**

**TOTAL TEST(S) FEE:** \_\_\_\_\_

**SEND APPLICATION TO:**

**Joseph Grasso**  
**18 E. West Street**  
**Glassboro NJ 08028**

**NON-MEMBER FEE-\$15.00:** (if applicable) \_\_\_\_\_

**LATE FEE: \$15, if applicable** \_\_\_\_\_

**ICE & HOSPITALITY FEE** **\$ 15.00**

**TOTAL DUE** \_\_\_\_\_

**MAKE CHECKS PAYABLE TO HOLLYDELL FSC**

**QUESTIONS**—Call Joe (856) 881-4057 or 856-304-0498

**APPLICANTS MUST BE AVAILABLE TO TEST AT LEAST 45 MINUTES PRIOR TO THEIR SCHEDULED TEST TIME.**

**\*\*\*\*\*PERMISSION TO TEST FOR NON-HOLLYDELL FSC MEMBERS\*\*\*\*\***

This certifies that \_\_\_\_\_ is a member in good standing of \_\_\_\_\_ and has permission to test on the above date. Please send results to (include SASE) \_\_\_\_\_

**TEST CHAIR SIGNATURE:** \_\_\_\_\_

**Date received** \_\_\_\_\_ **Amount** \_\_\_\_\_ **Check No.** \_\_\_\_\_