

Richmond Ice Zone 2010 ISI Spring Splash May 15 & 16, 2010

Name _____ Gender _____ Birthdate _____ Age as of May 15 _____

Phone _____ Team (Rink) _____ ISI Number _____ Exp _____

Address _____ City _____ State _____ Zip _____

Highest Level ISI Test(s) passed (as of May 15) _____ Email _____

Rink FAX NUMBER _____ Rink PHONE NUMBER _____

Coach's Name _____ Phone (h) _____ (w) _____

Address _____ City _____ State _____ Zip _____

Email _____ Do you plan to attend the Spring Splash? YES NO

Coach's judging Certification Level: Gold Silver Bronze Coach's Membership # _____ Exp _____

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 indicate level skater is entering (under event):

Tots (Please circle)	Pre Alpha - Delta	Freestyle	Interpretive	Artistic	Spotlight <i>Circle: Couple Family</i>	Solo Spotlight
1 2 3 4	Please Circle: Pre Alpha Alpha Beta Gamma Delta				Low (Pre Alpha – Delta) Medium (FS 1 – 3) Intermediate (FS 4 – 5) High (FS 5 – 10)	Please Circle: Lt. Ent Dram. Charc.
Footwork	Individual Compulsories	Rhythmic Skating	Open Freestyle	Dance	For Couple or Family Spotlight: Please circle Couple or Family and send a separate entry form for each partner.	
		<i>Please Circle:</i> Ball Hoop Ribbon	Please Circle: Bronze Silver Gold Platinum	<u>Circle:</u> SOLO COUPLE <u>Level:</u>		

Partner Name _____ Family Couples Age _____ Level _____

Partner Name _____ Family Couples Age _____ Level _____

Entry Fees:

First Entry (**Tots – Delta**) \$35.00 _____

First Entry (**FS. 1 – 10**) \$45.00 _____

Family Entry \$70.00 _____
 (Covers the first event for each member of the same family)

Each Additional Entry \$20.00 x _____ = \$ _____

Total \$ _____

Please mail all entry forms and fees to:

Richmond Ice Zone
 636 Johnson Willis Dr.
 Richmond, VA 23236
 Attn: Gaby Corcoran

**Please make checks payable to:
 Richmond Ice Zone**

Credit Card: Visa MC Am Ex Discover

Exp _____

Signature _____

Entry deadline: April 19, 2010

No refunds will be given on any entries. Late entries will be charged double.

I understand that I skate at this competition at my own risk and hereby release The Richmond Ice Zone, its owners and all personnel from all liability. I agree that any photographs or videos of myself (or my child) by the Richmond Ice Zone or authorized photographer may be used exclusively by the Richmond Ice Zone. I understand that I (or my child) may be scheduled to compete any time between 8:00am and 8:00pm on Saturday, May 15 and/or Sunday May 16, 2010.

 Signature of Skater

 Signature of Parent/Guardian

 Signature of Coach