

**Columbia Figure Skating Club**  
**Test Application** (Please Print)

**Test Date: 5/15/2020**  
**Application Due: 5/1/2020**

Name: \_\_\_\_\_ USFS#: \_\_\_\_\_

Email: \_\_\_\_\_ Phone#: \_\_\_\_\_

Home Club: \_\_\_\_\_ (If **not** Columbia FSC, **include letter of permission**)

Coach's name: \_\_\_\_\_ Coach's USFS # \_\_\_\_\_

Coach's phone: \_\_\_\_\_ Coach's email: \_\_\_\_\_

Coach's Signature: \_\_\_\_\_

*Signature of Coach confirms that the skater is ready to test and that the Coach is in compliance with US Figure Skating rules.*

**PAYMENT** by check payable to: **Columbia Figure Skating Club**

(Note: \$25 fee for any returned check for any reason)

Moves in the Field Tests			Free Skating Tests		
	Pre-Preliminary	<b>\$45</b>		Pre-Preliminary	<b>\$35</b>
	Preliminary	<b>\$50</b>		Preliminary	<b>\$40</b>
	Pre-Juvenile	<b>\$55</b>		Pre-Juvenile	<b>\$45</b>
	Juvenile	<b>\$55</b>		Juvenile	<b>\$50</b>
	Intermediate	<b>\$60</b>		Intermediate	<b>\$55</b>
	Novice	<b>\$65</b>		Novice	<b>\$60</b>
	Junior	<b>\$70</b>		Junior	<b>\$65</b>
	Senior	<b>\$75</b>		Senior	<b>\$70</b>

Adult Moves in the Field Tests			Adult Free Skating Tests		
	Pre-Bronze	<b>\$45</b>		Pre-Bronze	<b>\$45</b>
	Bronze	<b>\$55</b>		Bronze	<b>\$50</b>
	Silver	<b>\$60</b>		Silver	<b>\$55</b>
	Gold	<b>\$65</b>		Gold	<b>\$60</b>

<b>Test Fees</b> (total from above)	
<b>Hospitality Fee</b> (required)	<b>\$5.00</b>
<b>Guest Fee</b> (\$50 for Non-club members)	
<b>Late Fee</b> (\$25 if postmarked after the deadline)	
<b>TOTAL FEES</b>	

**Late fee required if postmarked after 5/1/2020**

### IMPORTANT TEST SESSION INFORMATION

- 1) The test fees are non-refundable and not returned if tests are not taken including contingent tests. In the case of illness or injury, you need to provide a doctor's note and we will forward the test fee to the next test session. Requests to withdrawal or switch to the following test session without paying the fees again will be considered one time only if the request is received at least 2 weeks prior to the test date.
- 2) Full and associate members of Columbia Figure Skating Club receive priority for test sessions. All others (including CFSC member who do not submit application on time) are first come, first served. Late applications will be accepted if space allows and at the discretion of the test chair.
- 3) The test schedule will be created by the CFSC test team one week before the test date and emailed to all parents/skaters and coaches at the email address provided on the application form.
- 4) When you register for a test, you are committing to test at any time during the session. After the test schedule is posted, no time changes will be permitted. Any personal requests for specific times should be submitted to the test Chair at least 2 weeks before the test date. While we will attempt to accommodate time requests, we cannot guarantee timing.
- 5) On the test day, please arrive at the rink for your test at least one hour prior to your scheduled warmup time. If you are unable to attend the test session on the testing day, please notify the test chair as soon as possible.
- 6) If you are not a CFSC member, you must provide a Permission Letter from your home club in order to test at CFSC.
- 7) If CFSC is your home club and you are testing outside of CFSC, you need to request a Permission Letter from CFSC test chair and have the test chair sign the form for each test that you take. It is skater's responsibility to obtain and provide the Permission Letter to the test chair away from the home club.

### LIABILITY WAIVER AND INFORMATION ACKNOWLEDGMENT

The USFSA and CFSC undertake no responsibility for damages or injuries suffered by the candidates. As a condition of and in consideration of the acceptance of their applications, all candidates and their parents and/or guardians shall be deemed to have agreed to assume all risks of injury to the candidate's person and property resulting from, caused by or connected with the conduct and management of the tests, and to release any and all claims which they may have against any officials, the USFSA, the CFSC and against their officers. Applications shall be accepted only on the foregoing conditions. I have reviewed USFSA Rule TR 7.03 and agree to these conditions.

*I understand that incomplete applications will be returned. I have reviewed this application before mailing. I have obtained all **required signatures**. I have included a **permission letter** (if required), and appropriate **test fees** (including late fees, if applicable). I acknowledge that it is my responsibility to verify that test application has been received.*

\_\_\_\_\_  
**Signature** (Skater if over age 18 or Parent if skater under age 18)

**Please mail completed application and test fees to:**

Heling Liu  
5007 Crape Myrtle Court  
Ellicott City, MD 21042  
Email: [cfsctesting@gmail.com](mailto:cfsctesting@gmail.com)

#### **For Club Use Only:**

Paid Date \_\_\_\_\_  
Check# \_\_\_\_\_  
Email Confirm \_\_\_\_\_