



SKATE BEIJING 2019

INDIVIDUAL ENTRY FORM

19th – 21st April, 2019



Please Print Above Line:

Family Name	First Name	ISI/ISIA Asia Membership#	Expiration Date
			Male / Female
Home Rink	Birth date (YY / MM / DD)	Age (as of April 19, 2019)	Gender
Tested Level	City	Country	Phone no.
			E-mail Address

PLEASE CHECK CORRECT BOX:

<p>Tot 1 - 4</p> <input type="checkbox"/> Solo Program	<p>Freestyle 1 – 10</p> <input type="checkbox"/> Solo <input type="checkbox"/> Footwork <input type="checkbox"/> Interpretive <input type="checkbox"/> Artistic <input type="checkbox"/> Solo Compulsories	<p>Hockey Event</p> <input type="checkbox"/> Skating <input type="checkbox"/> Shooting <input type="checkbox"/> Goalie	<p>Solo Dance 1 – 10</p> <p>Level: _____</p> <p>Choice of Dance:</p>
<p>Pre-Alpha - Delta</p> <input type="checkbox"/> Solo Program <input type="checkbox"/> Stroking (AL - DL only) <input type="checkbox"/> Solo Comp.	<p>Rhythmic Spotlight</p> <input type="checkbox"/> Ball <input type="checkbox"/> Character <input type="checkbox"/> Hoop <input type="checkbox"/> Dramatic <input type="checkbox"/> Ribbon <input type="checkbox"/> Lt. Ent.	<p>Figure 1 – 10</p> <p>Level: _____</p> <input type="checkbox"/> Regular Figures <input type="checkbox"/> Creative Figures <input type="checkbox"/> Free Figures	<p>Open Freestyle</p> <input type="checkbox"/> Bronze <input type="checkbox"/> Silver <input type="checkbox"/> Gold <input type="checkbox"/> Platinum <input type="checkbox"/> Speedracing (group by age) <input type="checkbox"/> Surprise

PARTNER ENTRIES	SIM	MIX	PARTNER NAME	ISI#	CHOICE OF DANCE	PARTNER AGE
<input type="checkbox"/> Couple 1 - 10 Level: _____	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> Pair 1 – 10 Level: _____	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> Dance 1 – 10 Level: _____	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> Free Dance 1 – 10 Level: _____	<input type="checkbox"/>	<input type="checkbox"/>				
COUPLE SPOTLIGHT						
<input type="checkbox"/> LOW <input type="checkbox"/> Bronze		<input type="checkbox"/> Char.				
<input type="checkbox"/> Silver <input type="checkbox"/> Gold		<input type="checkbox"/> Drama.				
<input type="checkbox"/> Platinum		<input type="checkbox"/> Lt. Ent.				
JUMP & SPIN TEAM						
<input type="checkbox"/> Low <input type="checkbox"/> Bronze <input type="checkbox"/> Silver <input type="checkbox"/> Gold <input type="checkbox"/> Platinum						

Fill out form carefully and completely – including signatures below. There will be NO REFUNDS. We reserve the right to limit the number of entries without notice. I skate at this competition at my own risk and hereby release ISI-USA, ISIA Asia, the rink owners, rink management, rink staff, and event organizers from all liability for any accident or injury. I declare that the home rink listed above is the rink where I wish to represent. Upon entering this competition, I hereby agree that any photographs or videos taken of me, by the event organizers or any authorized party, maybe used exclusively for any purpose by the event organizer or any other use authorized party.

Note: Member must be current through event. All tests and memberships must be registered with the ISIA Asia office in Hong Kong or ISI-USA by 4th March 2019.

FEES & PAYMENT: Entries and full payment must be received in Le Cool Ice Rink Beijing **BY 4th March 2019.**

DOUBLE FEES APPLY AFTER THAT DATE

Skater / Parent / Guardian Signature _____ Date _____
 I declare that the information above is true, that this skater's test(s) are registered with ISI-USA or ISIA Asia, that the skater is a current Individual or Professional Member of ISI-USA or ISIA Asia, that that skater is skating in the proper level and categories, and that the home rink is correct.

First Event USD \$60 x 1 = USD \$60
 Additional Event USD \$30 x = USD \$

TOTAL PAYMENT = USD \$

Coach Signature _____ Coach Name _____ Date _____