

Send Entry Form & Fees to:

BX Rink
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 CBD Boulevard Bintaro Jaya Sektor VII
 Tangerang Selatan, Indonesia – 15227
 Telp: (+6221) 2986-4888
 E-mail: skating.academy@bxrink.com

INDIVIDUAL ENTRY FORM

FIGURE SKATING

INDONESIA ICE SKATING OPEN (IISO) 2023

JANUARY 26-28



SKATER INFORMATION (Please fill-out the form CAREFULLY and COMPLETELY)

REV.01

Name _____
 (to be printed on the Competition Program Book)

Age _____
 (as of Jan 26, 2023)

Gender M F
 (please check the box)

Rink _____

Birth Date (day/month/year) _____

Coach _____

ISI Membership # _____

T-Shirt Size XS S M L XL

INDIVIDUAL EVENTS (Highest test level must be registered with the ISIA Asia by December 15th, 2022)

Highest ISI Test Level: _____ (Tot 1-4 / Pre-Alpha - Delta / FS 1-10 or Bronze-Platinum)	M U S I C A L	Solo Spotlight (All Levels) <input type="checkbox"/> Character <input type="checkbox"/> Dramatic <input type="checkbox"/> Light Entertainment	M U S I C I A N C E L	Solo Dance (1-10) <input type="checkbox"/> Level _____
		Rhythmic (FS 1-10) <input type="checkbox"/> Ball <input type="checkbox"/> Hoop <input type="checkbox"/> Ribbon		Figures (1-10) _____ (Level) <input type="checkbox"/> Figures <input type="checkbox"/> Free Figures <input type="checkbox"/> Creative Figures
M U S I C A L	<input type="checkbox"/> Solo Program (PA-DL, FS 1-10) <input type="checkbox"/> Artistic (FS 1-10) <input type="checkbox"/> Footwork (FS 1-10)	M U S I C I A N C E L	Open Freestyle Event (Choose Only 1) <input type="checkbox"/> Bronze (FS 1-3) <input type="checkbox"/> Silver (FS 4-5) <input type="checkbox"/> Gold Short (FS 6-7) <input type="checkbox"/> Gold (FS 6-7) <input type="checkbox"/> Short Platinum (FS 8-10) <input type="checkbox"/> Platinum (FS 8-10) <input type="checkbox"/> Platinum Plus (FS 8-10)	
	<input type="checkbox"/> Stroking (AL-DL ONLY) <input type="checkbox"/> Solo Compulsories (All Levels) <input type="checkbox"/> Solo Surprise (All Levels) <input type="checkbox"/> Speed racing (All Levels)		PLEASE NOTE: <ul style="list-style-type: none"> Rhythmic: Can do more than 1 event with different program. Any change to this original Entry Form will result in a change fee of <u>Rp150.000,- PER CHANGE / PER SKATER.</u> ENTRY DEADLINE: December 15th, 2022 DOUBLE FEES APPLY AFTER THAT DATE 	

PARTNER EVENTS

	LOW (PA-DL)	BRONZE (FS 1-3)	SILVER (FS 4-5)	GOLD (FS 6-7)	PLATINUM (FS8-10)	PARTNER NAME	ISI MEMBERSHIP #	PARTNER AGE
NON MUSICAL	Jump & Spin Team <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
MUSICAL	Couple Spotlight <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/> Character <input type="checkbox"/> Dramatic <input type="checkbox"/> Light Entertainment							
	Couple 1-10 Level _____		<input type="checkbox"/> SIM	<input type="checkbox"/> MIX				
	Dance 1-10 Level _____		<input type="checkbox"/> SIM	<input type="checkbox"/> MIX				
	Free Dance 1-10 Level _____		<input type="checkbox"/> SIM	<input type="checkbox"/> MIX				
Pair 1-10 Level _____								

FEES & PAYMENT (All amounts are Indonesia Rupiahs)

First Event : 1 x USD 50 = USD 50
 Add. Events : _____ x USD 40 = Rp _____
 (Musical)
 Add. Events : _____ x USD 30 = Rp _____
 (Non Musical)

There will be NO REFUNDS. ISI reserves the right to limit the number of entries without notice. I skate at this competition at my own risk and hereby release ISIA Asia, ISI-USA, 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 skate.

TOTAL PAYMENT = Rp _____

NOTE: Membership must be current through event. All tests and memberships must be registered with the ISIA Asia office in Hong Kong or ISI (U.S.) by December 15th, 2022

Skater Signature _____ Parent Signature (if applicable) _____ Date _____

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

OFFICE USE ONLY

Payment Type: _____ Amount: _____
 Date Received: _____ Initials: _____

Coach Signature _____ Date _____