

SEND ENTRY AND FEE TO:
 Skyrink Jakarta
 Level 3 Mal Taman
 Anggrek
 Jl Letjen S. Parman Kav
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 Jakarta Indonesia 11470
 Tel: 6221-5642888
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INDIVIDUAL ENTRY FORM SKATE JAKARTA 2023 March 16 -19, 2023



SKATER INFORMATION

				___ Male / ___ Female
FIRST NAME	LAST NAME	ISI MEMBER #	Expiration Date	
Home Rink	Birthdate - Day/Month/Yr.	Age as of March 16, 2023	Gender: M / F	
Tested Level	City	Country	Phone No.	E-mail address

INDIVIDUAL EVENTS

Pre- Alpha - Delta	Freestyle 1-10	Solo Dance 1-10	
<input type="checkbox"/> Solo Program	<input type="checkbox"/> Solo Program	Level: _____	<input type="checkbox"/> Speedracing (group by age)
<input type="checkbox"/> Stroking (AL - DL only)	<input type="checkbox"/> Footwork	Choice of Dance:	<input type="checkbox"/> Surprise
<input type="checkbox"/> Solo Comp	<input type="checkbox"/> Solo Compulsories		<input type="checkbox"/> Hockey
Solo Spotlight	<input type="checkbox"/> Artistic	FIGURE 1-10	<input type="checkbox"/> Skating <input type="checkbox"/> Shoot <input type="checkbox"/> Goalie
<input type="checkbox"/> Character	<input type="checkbox"/> Interpretive	<input type="checkbox"/> Regular Figures	Open Freestyle
<input type="checkbox"/> Dramatic	Rhythmic Spotlight	<input type="checkbox"/> Creative Figures	<input type="checkbox"/> Bronze (FS 1-3)
<input type="checkbox"/> Light Entertainment	<input type="checkbox"/> Ball <input type="checkbox"/> Character	<input type="checkbox"/> Free Figures (3 - 10)	<input type="checkbox"/> Silver (FS4-5)
TOT 1 - 4	<input type="checkbox"/> Hoop <input type="checkbox"/> Dramatic	INDICATE LEVEL	<input type="checkbox"/> Gold (FS 6-7)
<input type="checkbox"/> Solo Program	<input type="checkbox"/> Ribbon <input type="checkbox"/> Lt. Ent	(1-10)	<input type="checkbox"/> Short Gold (FS6-7)
<input type="checkbox"/> _____	INDICATE LEVEL	<input type="checkbox"/> _____	<input type="checkbox"/> Platinum (FS8-10)
	(1-10)		<input type="checkbox"/> Short Platinum (FS8-10)

PARTNER EVENTS

	SIM	MIX	Partner Age	ISI #	Partner Name
Couple Spotlight	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> Character	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> Couple 1-10	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> Pair 1 -10	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> Dance 1 - 10	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/> Free Dance 1 -10	<input type="checkbox"/>	<input type="checkbox"/>			
Jump & Spin Team	<input type="checkbox"/>	<input type="checkbox"/>			
	L	B.	S.	G.	P
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FEES & PAYMENT

<p>There will be NO REFUNDS. We reserve the right to limit the number of entries without notice. Fill out form carefully and completely - including signature below.</p> <p>I skate at this competition at my own risk and hereby release ISI Asia, ISI, the rink owner, management, staff, and organizers from all liability for any accident or injury. I declare that the home rink listed above is the true rink I represent.</p> <p>I declare that the information above is true, that this skater's test(s) are registered with ISIAsia or ISI, that the skater is a current individual Member of ISIAsia or ISI, that this skater is skating in the proper levels and categories, and that the home rink is correct.</p>	<p>Note: Membership must be current through event . All test and memberships must be registered with ISIAsia office in Hong Kong or ISI(US) before February 2, 2023</p> <p>FEES & PAYMENT</p> <p>Entries must be received by Skyrink before February 2, 2023</p> <p>STRICTLY DOUBLE FEES APPLY AFTER THIS DATE</p> <table style="width: 100%;"> <tr> <td>First Event</td> <td>Rp 700.000 x _____ = _____</td> </tr> <tr> <td>Add Events (musical)</td> <td>Rp 500.000 x _____ = _____</td> </tr> <tr> <td>Add Events (Non musical)</td> <td>Rp 300.000 x _____ = _____</td> </tr> <tr> <td>Solo Surprise</td> <td>Rp 200.000 x _____ = _____</td> </tr> <tr> <td>TOTAL PAYMENT</td> <td>_____</td> </tr> </table> <p>PLEASE NOTE: ANY CHANGES TO THE ORIGINAL ENTRY FORM WILL RESULT IN A CHANGE FEE OF Rp. 200.000/ SKATER IF ACCEPTED.</p> <p>Date Received: _____ Initial : _____</p> <p>Payment Type: _____ Amount: _____</p>	First Event	Rp 700.000 x _____ = _____	Add Events (musical)	Rp 500.000 x _____ = _____	Add Events (Non musical)	Rp 300.000 x _____ = _____	Solo Surprise	Rp 200.000 x _____ = _____	TOTAL PAYMENT	_____
First Event	Rp 700.000 x _____ = _____										
Add Events (musical)	Rp 500.000 x _____ = _____										
Add Events (Non musical)	Rp 300.000 x _____ = _____										
Solo Surprise	Rp 200.000 x _____ = _____										
TOTAL PAYMENT	_____										
Skater / Parent Si	Coach Name	Date									
Coach Signature	Coach Name	Date									

