



ISI Skate Shenzhen 2023

02nd-03rd December, 2023

Team Entry Form



TEAM INFORMATION (Please fill-out the form CAREFULLY and COMPETELY) – USE SEPARATE FORM PER TEAM PER EVENT ENTRY

Team Name _____

(To Be Printed on the Competition Program Book)

Rink _____ Country _____

Coach _____ Professional Membership # _____ Exp _____

TEAM EVENT

Synchronized Team Event

- Synchronized Formation Compulsories
- Synchronized Skating Compulsories
- Synchronized Formation
- Synchronized Advanced Formation
- Synchronized Dance
- Team Compulsories Level ____
- Freestyle Synchro Level ____

- Family Spotlight
- Ensemble
- Production Team
- Pattern Team
- Kaleidoskate
- Team Surprise
 - Low Int
 - Med High

PLEASE NOTE: Any change to this original Entry Form will result in a change fee of US29 per Change per Skater

Entry Deadline: Oct 30, 2023. **DOUBLE FEES APPLY AFTER THIS DATE IF ACCEPTED.**

TEAM AGE CATEGORY

- Tot (Majority 6 years old or younger)
- Junior Youth (Majority 7-8 years old)
- Youth (Majority 9-11 years old)
- Senior Youth (Majority 12-14 years old)
- Teen (Majority 15-19 years old)
- Adult (Majority 20-39 years old)
- Master (Majority 40 years or older)
- Collegiate

PLEASE NOTE: Skater's age to be determined as of Dec 02, 2023

TEAM MEMBERS (PLEASE CLEARLY PRINT INFORMATION BELOW OR ATTACH TEAM ROSTER WITH REQUIRED INFORMATION)

	Skaters' Name	Age	Gender		Skaters' Name	Age	Gender
1				11			
2				12			
3				13			
4				14			
5				15			
6				16			
7				17			
8				18			
9				19			
10				20			

There will be NO REFUNDS. I declare that the information above is true and that all skater have a current Individual or Professional Member of ISIAAsia or ISI USA, I have notified all team members that they skate at their own risk at this competition, and hereby release ISIAAsia, ISI USA, the rink owner, management, staff & event organizers from all liability for any accident or injury. I hereby **AGREE** that any photograph or videos taken of our team by the event organizers or authorized parties may be used exclusively for any purpose by the aforesaid parties.

FEES & PAYMENT (All Amounts in US Dollars)

Team Event : _____ x USD\$ 29 = USD\$ _____

TOTAL AMOUNT : _____ = USD\$ _____

OFFICE USE ONLY

Payment Type: _____ Amount: _____

Date Received: _____ Initials: _____

Coach Signature _____ Date _____