

2010 Champlain Valley Open Application July 23-25, 2010

Mail entry form and Permission Page to: Champlain Valley Open c/o Sharron Scott, 290 Oak Ridge Estates, Morrisville VT 05661

Last Name:	First Name	Gender: M F	Date of Birth (mm/dd/yy):
Street		City/State/Zip Code	
Email Address		Telephone	
US Figures Skating/Skate Canada #		Home Club	
Highest test passed as of June 19, 2010: Free Skate If none, mark N/A or None		MIF	Dance
Partner's Name (Dance, Similar Pairs) If more than one partner event specify names and events.			

Skating Professional		Optional Skating Professional	
Name:	USFS #:	Name:	USFS#:
Signature:		Signature:	
e-mail:		e-mail:	

Short Program Critique <input type="checkbox"/> Yes <input type="checkbox"/> No Intermediate (IJS) Novice (IJS) Junior (IJS) Senior (IJS) Free Skate No Test Pre-Preliminary Preliminary Pre-Juvenile Free Skate Critique <input type="checkbox"/> Yes <input type="checkbox"/> No Open Juvenile Juvenile (IJS) Intermediate (IJS) Novice (IJS) Junior (IJS) Senior (IJS)	Competitive Test Track Limited Beginner Beginner Pre-Preliminary Preliminary Pre-Juvenile Juvenile Intermediate Novice Junior Senior Moves in the Field Pre-Preliminary Preliminary Pre-Juvenile Juvenile Intermediate Novice Junior Senior	Compulsory Moves Beginner Pre-Preliminary Preliminary Pre-Juvenile Juvenile Intermediate Compulsory Spins Beginner Pre-Preliminary/Preliminary Pre-Juvenile/Juvenile Intermediate/Novice Junior/Senior Showcase Beginner Pre-Preliminary/Preliminary Pre-Juvenile/Juvenile Intermediate/Novice Junior/Senior Similar Pairs Pre-Preliminary/Preliminary Pre-Juvenile and Above	Solo Dance Pre-Juvenile Juvenile Intermediate Novice Junior Senior Shadow Dance Pre-Juvenile Juvenile Intermediate Novice Junior Senior Open Dance Rhythm Blues Swing Dance Ten Fox European Waltz Rocker Foxtrot Paso Doble Argentine Tango
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Fees			
IJS Single Events 1 st Event: \$80 2 nd Event \$50 Single Events 1 st Event: \$65 2 nd Event: \$45 Additional events: \$40	Partnered Events (not IJS) 1 st Event: \$30 per person Additional events: \$25/person Make checks payable to: Champlain Valley Skating Club - US Funds only	Total Amount Enclosed: \$ _____ Late Fee (if applicable (\$30)) \$ _____ TOTAL AMOUNT ENCLOSED \$ _____	

For Credit Card Payments: Visa/Mastercard# _____ Exp Date: _____ Amt Due: _____

Cardholder Name (print): _____ Signature: _____

Billing Address: _____

CERTIFICATE OF ELIGIBILITY: I certify that _____ is a member in good standing of this club and is an amateur in accordance with the rules of US Figure Skating and Skate Canada, and is eligible to skate in the specified event(s).
 Name of Club _____ Name of club official (print) _____
 Club Official Signature _____ Date _____ Title _____

INDEMNITY CLAUSE: U.S. Figure Skating, Champlain Valley Skating Club and the rink undertake no responsibility for damages or injuries suffered by the skaters. As a condition of and in consideration of acceptance of their entries for participation therein, all entrants with their parents and guardians shall be deemed to agree to assume all risks of injury to their person and property resulting from, caused by or connected with, the conduct and management of this competition, and to waive and release any and all claims which they might have against any official, U.S. Figure Skating, Champlain Valley Skating Club, its officers or the rink holding this competition. All entries shall be accepted only on such condition. (3222)

Skater name (please print): _____ Parent Name (please print) _____
 If skater is under 18 years of age
 Skater Signature _____ Date _____
 Or Parent Signature if skater is under 18 years of age _____