APPLICATION: FREESTYLE & MOVES TESTS ONLY

Test Date: _____
Application Deadline: **Postmarked 2 WEEKS prior to test date. Late fees will be charged after that date.**

Yonkers Figure Skating Club 2009 – 2010 Season

www.yfsc.org

Skater: _____ USFS Number: ***(Required)*** _____

Parent's Name: _____ Email: ***(Required)*** _____

Address: _____ Phone: _____ Cell**:** _____

_____ Skaters D/O/B: _____

Home Club: _____ Coach's Cell #: _____

Name of Coach**:** _____ Coach's email: ***(Required)*** _____

The test fees for the Yonkers Figure Skating Club (YFSC) are as follows. An application or hospitality fee should be added for the first test only. The Hospitality Fee helps defray the cost of reimbursing judges for their out-of-pocket expenses (travel, etc.) and providing them and the skaters with refreshments at every test session.

☐ **FULL MEMBERS**	First Test = $60.00 (All Test Levels) plus $5.00 Hospitality Fee Additional Tests are $35.00 each
☐ **Alumni MEMBERS**	First Test = $60.00 (All Test Levels) *plus* $15.00 Application Fee Additional Tests are $35.00 each
☐ **ASSOCIATE MEMBERS**	First Test = $60.00 (All Test Levels) plus $20.00 Application Fee Additional Tests are $35.00 each
☐ **NON-CLUB MEMBERS**	First Test = $60.00 (All Test Levels) *plus* $35.00 Application Fee Additional Tests are $35.00 each

FEES ENCLOSED:

Total Test Fees: $_____

Additional Fees:

- YFSC Members ($5 Hospitality) $_____
- Alumni Member ($15 App) $_____
- Associate Member ($20 App) $_____
- Non-YFSC Member ($35 App) $_____

Late Fee ($30.00) $_____

TOTAL ENCLOSED: $_____

No refunds after application deadline.

Applications **must** be filled out completely and returned to the mailing address below with a check made payable to the Yonkers Figure Skating Club.

Applications will be processed on a first-come, first-served basis. Priority will be given to YFSC Members. If session is oversubscribed, applications will be prioritized according to membership status and the date received. Test dates and time are subject to change.

Please **do not** call the Test Chair for test times. A tentative test schedule will be emailed to each skater & coach prior to the test date.

LIST EACH TEST TO BE TAKEN SEPARATELY.

1. _____ 2. _____ 3. _____ **4.** _____

If the YFSC is not your home club, please complete section below or enclose a separate letter of permission from your home club.

PERMISSION TO TEST: *To be completed by a home club official, if YFSC is not your home club.*

_____ is a member in good standing of the _____ and has permission to test at the Yonkers Figure Skating Club's Test Session on the above date.

Name of Official *(Print)* _____ Title: _____

Signature _____ Date: _____

MAILING ADDRESS: Don Prechtl, P.O. Box 821 – Greystone Station, Yonkers, NY 10703 **Email**: **yfsctestchair@optonline.net**

The USFS and its Member Clubs undertake *NO* responsibility for damages or injuries during Club Tests.