

**THE ESSEX SKATING CLUB OF NEW JERSEY
2009 – 2010 USFSA TEST APPLICATION**

APPLICATIONS MUST MEET POSTMARK DEADLINE OR THE TEST WILL NOT BE SCHEDULED.
 Complete both sides of this form.

Test Date _____

Name: _____ USFSA # _____

Address: _____ City, State, Zip _____

Telephone: day _____ evening _____ e-mail _____

Home Club _____ (Attach TEST PERMISSION Letter if other than ESC of NJ)

Coach's name (print) _____ PSA # _____

Coach's signature _____ Phone number _____

Circle test(s) to be taken (maximum 2 tests/skater). There is no contingency testing.

Moves in the Field	Adult Moves	Free Skate
Pre-Preliminary \$25	Pre- Bronze \$25	Pre-Preliminary \$25
Preliminary \$25	Bronze \$35	Preliminary \$25
Pre-Juvenile \$30	Silver \$40	Pre-Juvenile \$30
Juvenile \$35	Gold \$50	Juvenile \$35
Intermediate \$40		Intermediate \$40
Novice \$45	Free Dance (per candidate)	Novice \$45
Junior \$50	Juvenile \$35	Junior \$50
Senior \$60	Intermediate \$40	Senior \$60
	Novice \$45	
Pairs (per candidate)	Junior \$50	Adult Free
Pre-Juvenile \$30	Senior \$60	Pre-Bronze \$25
Juvenile \$35		Bronze \$35
Intermediate \$40		Silver \$40
Novice \$45		Gold \$50
Junior \$50		
Senior \$60	DANCE TESTS	
	Circle level: Standard Masters Adult	Complete level? Y es NO
Preliminary \$25 each	DW CT RB	Partner:
Pre- Bronze \$25 each	SD CC FT	
Bronze \$30 each	TF WW HH	
Pre-Silver \$35each	14step FT EW	
Silver \$40 each	AW Tango RF	
Pre-Gold \$45 each	PD Kilian SW BL	
Gold \$50 each	AT QS WW VW	
International \$60 each		
write in name of dance:		

FEES

Test Fee: _____

Administrative Fee: + \$8.00

Guest Fee: (\$ 30.00) _____

Late Fee: (\$ 20.00) _____

ESC members non-ice buying (\$ 15.00)* _____

TOTAL TESTS FEES: _____

Please note: Rostered members of the Blades, Synchroettes or TOI waive the \$15.00 non-buying ice fee.

Please indicate team level: _____

Test Application Policies:

1. Test fees are NOT refundable, unless a doctor's note is presented at time of cancellation/withdrawal.
2. Skaters/Coaches who withdraw or cancel after the test schedule is posted MUST submit a new application with appropriate fees for the next test date.
3. Only completed applications which meet postmark deadline will be accepted. No fax, metered, priority or mail requiring signatures will be accepted. Checks should be made payable to "Essex SC of NJ" and mailed to:

Ms. Nancy Noonan
142 Mohawk Drive
Cranford, NJ 07016

WAIVER: I have read and understand the Test Procedures. In submitting this form, I do hereby for myself, my heirs, executors and administrators waive, release, and forever discharge any and all rights and claims for or to be, for which I may have or which may thereafter accrue to me against United States Figure Skating, the Essex Skating Club of NJ, and/or any other person connected with individually or collectively, from all responsibilities for any injury to person or property.

Applicant's signature _____

Parent/Guardian signature _____ Date _____