

**The Skating Club of New Hartford, Inc.  
PO Box 152  
New Hartford, NY 13413**

**TESTING APPLICATION**

**TEST DATE.....FRIDAY, MAY 25, 2018**

The Skating Club of New Hartford will be holding a test session at the Whitestown Arena on Friday, May 25, 2018. The **approximate** testing hours will be 2:00pm until 8:00pm. The schedule will be available no earlier than Monday, May 21st. Upon close of registrations, the test chair will release any unscheduled ice on the day of testing. Other than a small buffer period and any late test withdrawals, there will not be extra ice to schedule late registering tests. Please register early. Cancellations received after the close of registration will not receive a refund.

Tests offered are:

- Moves in the Field up through Senior level;
- Freeskate tests up through Senior level;
- Adult Moves and Adult Freeskate tests up through the Gold level;
- Solo dances up through the Gold level;
- Partnered dances up through the Pre-Gold level.

**INSTRUCTIONS:**

1. On time applications must be **RECEIVED** by the test chair by Tuesday, May 15, 2018.
2. Late applications will be accepted **ONLY** at the discretion of the Test Chairperson. If accepted, a \$30 late fee will be required.
3. Exact test fees (including late fees) must accompany fully completed test applications.
4. **PLEASE COMPLETE TEST FORM IN FULL:** Incomplete applications will be returned to the skater for completion. Should this cause the resubmission to be late, late fees may be assessed or the application may be denied.
5. Mail completed forms and fees to:  
**SC of New Hartford, 10723 Cosby Manor Rd., Deerfield, NY 13502**

**TEST FEES (circle the name and fee for each test you are taking)**

TEST	MIF Fee	FS Fee	Partner Dance	Dance	Dance	Dance	Dance	Fee / Dance
Pre-Preliminary	\$32	\$30	Preliminary	DW	CT	RB		\$27
Preliminary	\$37	\$35	Pre-Bronze	SD	CC	FIT		\$30
Pre-Juvenile	\$40	\$38	Bronze	HH	WIW	TF		\$35
Juvenile	\$42	\$40	Pre-Silver	14S	EW	FT		\$37
Intermediate	\$47	\$45	Silver	AW	T	RF		\$45
Novice	\$52	\$50	Pre-Gold	K	BL	PD	SW	\$48
Junior	\$57	\$55						
Senior	\$62	\$60						
			<b>Solo Dance</b>					
Pairs Juvenile	--	\$40	Preliminary	DW	CT	RB		\$27
Pairs Intermediate	--	\$45	Pre-Bronze	SD	CC	FIT		\$30
Pairs Novice	--	\$50	Bronze	HH	WIW	TF		\$35
Adult Pre-Bronze	\$35	\$35	Pre-Silver	14S	EW	FT		\$37
Adult Bronze	\$40	\$40	Silver	AW	T	RF		\$45
Adult Silver	\$45	\$45	Pre-Gold	K	BL	PD	SW	\$48
Adult Gold	\$50	\$50	Gold	VW	WW	QS	AT	\$55

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APPLICATION  
TEST – FRIDAY, MAY 25, 2018

Applicant's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Home Club: \_\_\_\_\_ USFSA # \_\_\_\_\_  
E-Mail address: \_\_\_\_\_

Date/level of last test:

Freestyle \_\_\_\_\_ Field Moves \_\_\_\_\_ Pairs \_\_\_\_\_  
Dance \_\_\_\_\_ Solo Dance \_\_\_\_\_ Free Dance \_\_\_\_\_

Test(s) to be taken:

Freestyle: \_\_\_\_\_ Fee: \$ \_\_\_\_\_  
Moves in the Field: \_\_\_\_\_ Fee: \$ \_\_\_\_\_  
Dance: \_\_\_\_\_ Fee: \$ \_\_\_\_\_ \*\*Partner: \_\_\_\_\_ USFSA # \_\_\_\_\_  
Dance: \_\_\_\_\_ Fee: \$ \_\_\_\_\_ \*\*Partner: \_\_\_\_\_ USFSA # \_\_\_\_\_  
Does this complete a dance level? Yes No  
Pairs: \_\_\_\_\_ Fee: \$ \_\_\_\_\_ \*\*Partner: \_\_\_\_\_ USFSA # \_\_\_\_\_

AFTER MAY 17, 2018 \$30.00 (LATE)  
**HOSPITALITY FEE \$10.00 (All skaters)**

**TOTAL:** \$ \_\_\_\_\_

\*\*\*Checks should be made payable to: The Skating Club of New Hartford\*\*\*

To the best of my knowledge, the above candidate is eligible to test for the indicated tests.

Professional Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Home Club Officer – Permission to test**

To the best of my knowledge, the above is true and correct and the candidate is a member in good standing of our club.

\_\_\_\_\_  
Date: \_\_\_\_\_

(Signature and title)

The USFSA and its member clubs holding tests undertake no responsibility for damages or injuries suffered by the candidates. As a condition of and in consideration of the acceptance of their applications therefore, all candidates and their parents and/or guardians shall be deemed to have agreed to assume all risks of injury to the candidate's person and property resulting from, caused by, or connected with the conduct and management of the tests and to release any and all claims which they may have against any officials, the USFSA, the club holding the tests and its officers.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent or Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**INCOMPLETE FORMS WILL BE RETURNED FOR CORRECTION/COMPLETION  
AND MAY BE SUBJECT TO LATE FEE OR NOT ACCEPTED**

**!!! NO REFUNDS WILL BE ISSUED AFTER REGISTRATION DEADLINE – May 15, 2018 !!!**

**MAIL to: SC of New Hartford, 10723 Cosby Manor Road, Deerfield, NY 13502  
e-mail: bethscnh@gmail.com**