

TEST APPLICATION – Skating Club of Central Ohio Mail to: Dave Burdan, 6956 Post Preserve Blvd . Dublin, OH 43016

Name:	Phone:	USFSA No.
Address:		Age/Birthdate:
Town/State/ Zip Code:		SCOCO member: Home ____ Assoc ____ None ____
E-mail: Partner's name (pairs/dance only):		Home Club (if not SCOCO):

★ Skater's Signature (Parent/Guardian if skater is under 18 years old): _____

★ **Non-SCOCO Home Club Members** – Permission to test at SCOCO must be received prior to your test session. Please have the area below completed and signed by your Home Club test chair; emailed permissions accepted (submit to dburdan@columbus.rr.com):

The individual identified above is a member in good standing with (club) _____ for the period 20__ to 20__ and has permission to test at Skating Club of Central Ohio.

Signed _____ Date _____

★ **Signature of Professional:** _____ **Test Date: Aug 24, 2008**
Location: Dublin Chiller

Test Level	Moves (MIF)	Freestyle	Pairs	** Check all appropriate boxes <input type="checkbox"/> and circle O appropriate fees. List all applicable fees below. NOTE: \$20 Guest Fee Non-SCOCO members must pay quest fee per test session (not per test) No skater will be put on test schedule until payment & application have been received. Please make checks payable to Skating Club of Central Ohio: Total enclosed _____
Pre-Preliminary	<input type="checkbox"/> \$25	<input type="checkbox"/> \$20		
Preliminary	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30		
Pre-Juvenile	<input type="checkbox"/> \$35	<input type="checkbox"/> \$30		
Juvenile	<input type="checkbox"/> \$35	<input type="checkbox"/> \$30		
Intermediate	<input type="checkbox"/> \$40	<input type="checkbox"/> \$40		
Novice	<input type="checkbox"/> \$50	<input type="checkbox"/> \$40		
Junior	<input type="checkbox"/> \$50	<input type="checkbox"/> \$45		
Senior	<input type="checkbox"/> \$50	<input type="checkbox"/> \$45		
Adult Pre-Bronze	<input type="checkbox"/> \$25	<input type="checkbox"/> \$25		
Adult Bronze	<input type="checkbox"/> \$25	<input type="checkbox"/> \$25		
Adult Silver	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30		
Adult Gold	<input type="checkbox"/> \$35	<input type="checkbox"/> \$35		

DANCE Test Level	<input type="checkbox"/> Standard <input type="checkbox"/> Adult <input type="checkbox"/> Masters <input type="checkbox"/> <input type="checkbox"/> Free Dance				SCOCO OFFICE USE ONLY Fees	
	FEE/Dance	Select Dance(s) below				
Prelim. (Juv. Free)	\$15	<input type="checkbox"/> DW	<input type="checkbox"/> CT	<input type="checkbox"/> RB	<input type="checkbox"/> Free	Moves _____ Freestyle _____
Pre-Bronze (Int. Free)	\$15	<input type="checkbox"/> SD	<input type="checkbox"/> CC	<input type="checkbox"/> FIT	<input type="checkbox"/> Free	Dance _____
Bronze (Novice Free)	\$20	<input type="checkbox"/> HH	<input type="checkbox"/> WIW	<input type="checkbox"/> TF	<input type="checkbox"/> Free	Late Fee _____
Pre-Silver	\$20	<input type="checkbox"/> 14ST	<input type="checkbox"/> EW	<input type="checkbox"/> FT		Guest _____
Silver (Junior Free)	\$35	<input type="checkbox"/> AW	<input type="checkbox"/> T	<input type="checkbox"/> RF	<input type="checkbox"/> Free	Other _____
Pre-Gold	\$35	<input type="checkbox"/> K	<input type="checkbox"/> BL	<input type="checkbox"/> PD	<input type="checkbox"/> SW	Total _____
Gold (Senior Free)	\$50	<input type="checkbox"/> W	<input type="checkbox"/> WW	<input type="checkbox"/> QS	<input type="checkbox"/> AT <input type="checkbox"/> Free	Date Rec'd _____ Check No. _____
International	\$50	<input type="checkbox"/> R	<input type="checkbox"/> AUS	<input type="checkbox"/> CON	<input type="checkbox"/> YP <input type="checkbox"/> RW	
		<input type="checkbox"/> TR	<input type="checkbox"/> SAM	<input type="checkbox"/> GW	<input type="checkbox"/> MB	

APPLICATION POSTMARK DEADLINE IS August 11, 2008. Applications received after the deadline date will be subject, if accepted, to a \$10 late fee. Questions? Contact the test chair (Dave Burdan) by email dburdan@columbus.rr.com or phone 614-873-0116. Late applications will only be accepted at the discretion of the Test Chair. Test applications will be accepted in the following order: home club members, associate members, non-members, in the order that they are received, with the possible exception of high tests. No refund or credit of test fees is given if the test is cancelled by the applicant after the deadline date, including for contingent tests. (SCOCO discourages the scheduling of contingent tests). SCOCO reserves the right to limit the number of tests due to time constraints. Note: Pre-preliminary and preliminary MIF and freestyle tests may be judged by a single judge during a regular ice session and scheduled at any time by contacting the test chair.