



Levels 1-10 INDIVIDUAL ENTRY FORM

2016 ISI Winter Classic

Location: RDV Sportsplex Ice Den, Orlando FL
 Event Dates: Feb. 12-14, 2016 • Test & Entry Deadline: Dec. 1, 2015
 Send entry and fee to: Ice Skating Institute, 6000 Custer Rd, Bldg 9; Plano TX 75023
 Tel: 972.735.8800 • Fax: 972.735.8815 • www.skateisi.org

* 2016 DISCOUNT* EVENTS

Enter any individual or partner event for \$85 and enter Solo Compulsories, Jump & Spin, and/or Interpretive for **only \$15 each.**

YOUR INFORMATION (Please Print)

Current ISI Members of all ages are eligible to participate.

Last Name	First Name	ISI Member #	Exp. Date	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address		Birthdate	Age on Feb. 12, 2016	
City	State/Province	Zip	Country	Phone # (Required)
Home ISI Member Rink, Club, School, College or University		E-mail (Required)		USFSA Freestyle Test Level
Are you an active USFSA member who has competed at or above the Novice level at any USFSA National Championship within the last two years?				<input type="checkbox"/> Yes <input type="checkbox"/> No

INDIVIDUAL EVENTS

Highest ISI Test Level FS 1-10 or Bronze-Platinum <input type="checkbox"/> Solo Program <input type="checkbox"/> Solo Compulsories** <input type="checkbox"/> Solo Spotlight <input type="checkbox"/> Character (May only enter two Solo Spotlight events with different programs) <input type="checkbox"/> Dramatic <input type="checkbox"/> Light Entertainment <input type="checkbox"/> Themed	<input type="checkbox"/> Footwork <input type="checkbox"/> Interpretive** <input type="checkbox"/> Artistic <input type="checkbox"/> Rhythmic Skating <input type="checkbox"/> Ball <input type="checkbox"/> Hoop <input type="checkbox"/> Ribbon (May only enter two Rhythmic events with different programs) <input type="checkbox"/> Special Skater Stroking <input type="checkbox"/> Special Skater (1-10) _____	<input type="checkbox"/> Hockey Skating <input type="checkbox"/> Goalie <input type="checkbox"/> Hockey Shooting <input type="checkbox"/> Figures (1-10) _____ <input type="checkbox"/> Figures <input type="checkbox"/> Free Figures <input type="checkbox"/> Creative Figures ISI Open Freestyle Event <input type="checkbox"/> Bronze (FS 1-3) <input type="checkbox"/> Silver (FS 4-5) <input type="checkbox"/> Gold (FS 6-7) <input type="checkbox"/> Platinum (FS 8-10) <input type="checkbox"/> Gold Short <input type="checkbox"/> Platinum Short
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PARTNER EVENTS

<input type="checkbox"/> Couple Partner ISI # _____ Name: _____ Level (1-10) <input type="checkbox"/> Sim <input type="checkbox"/> Mix <input type="checkbox"/> Pair Partner ISI# _____ Name: _____ Level (1-10) <input type="checkbox"/> Level (B-P) <input type="checkbox"/> New Open Pair Bronze - Platinum	Themed Spotlight for 2016 is "Totally Groovy 70's" <i>Tie Dye and Bell Bottoms are back!</i>
<input type="checkbox"/> Couple Spotlight Partner ISI # _____ Name: _____ Med (FS1-3) <input type="checkbox"/> Int (FS4-5) <input type="checkbox"/> High (FS6-10) <input type="checkbox"/> <input type="checkbox"/> Character <input type="checkbox"/> Dramatic <input type="checkbox"/> Lt. Ent. (May only choose one)	For all Dance entries - please use separate Dance Entry form. <input type="checkbox"/> Jump & Spin** Partner ISI# _____ Name: _____ Med (FS1-3) <input type="checkbox"/> Int. (FS4-5) <input type="checkbox"/> High (FS6-10) <input type="checkbox"/>
<input type="checkbox"/> Themed Couple Spotlight ISI # _____ Name: _____ Med <input type="checkbox"/> Int <input type="checkbox"/> High <input type="checkbox"/>	

Be sure to sign here!

There will be **NO REFUNDS**. ISI reserves the right to limit the number of entries without notice. I skate at this competition at my own risk and hereby release ISI, the host facility(ies) and their owners, officers, directors, officials and personnel from all liability. I declare that the home rink listed above is the true rink/club/school that I wish to represent. Upon entering this competition, I hereby agree that any photographs or video taken of me, by ISI or any authorized party, may be used exclusively for any purpose by the ISI or any other use authorized by the ISI.

Skater signature _____	Date _____
Parent/guardian (if applicable) _____	Date _____
I declare that the information above is true, that this skater's test(s) is/are registered that the skater is a current individual member of the ISI, and is skating in the proper categories and levels, and that the home rink listed above is correct.	
Coach professional ISI # _____	Exp. date _____
Coach name (please print) _____	Date _____
E-mail address _____	Certification level _____
Is coach attending the event? <input type="checkbox"/> Yes <input type="checkbox"/> No (Judge/Coach credential info at skateisi.org)	

PAYMENT INFORMATION

Credit Card # _____	Exp. date _____
Card Security Code _____	Card Billing Zip Code _____
Cardhold (please print) _____	Authorized Signature _____

FEES AND PAYMENT (all amounts are U.S. Dollars)

- First event \$ 85 x 1 = \$ 85
 - Each additional \$ 30 x ___ = \$ _____
 - Family entry+ \$170 x 1 = \$ 170
 - **Discount events \$ 15 x ___ = \$ _____
- +Family entry covers 3 or more family members' first event entry; each additional entry is \$30 per person per event.

NOTE: Memberships must be current through the event. Membership renewals may accompany this entry form. All test and memberships must be registered with ISI. (Levels 9 & 10 receive first event free.)

Entry total _____
\$15 membership fee enclosed _____
ISIA Education Foundation donation (Tax deductible) _____
Total enclosed \$ _____ (Make check payable to ISI)

IF ACCEPTED, ENTRY FEES WILL BE DOUBLED AFTER ENTRY DEADLINE! ANY CHANGES TO THIS ORIGINAL ENTRY FORM WILL RESULT IN A CHANGE FEE OF \$25 PER CHANGE/PER SKATER.

OFFICE USE ONLY

Date received _____	Initials _____
Amount _____	Check # _____

