



The 57th Annual Robert Unger ISI Team Competition

May 1-3, 2026 **Entries Due: March 25, 2026**

Return entries to: Ice Chalet
100 Lebanon St.
Knoxville TN 37919

Endorsed by the
Ice Sports Industry!

(865) 588-1858 • icechalet@chaleticerinks.com • www.chaleticerinks.com/competition.htm

Robert Unger Team Competition

Return entry form to your team coach with your entry fee.
All entries must be postmarked by **March 25, 2026. Sorry -- NO REFUNDS.**

COMPETITOR INFORMATION *(Please print and fill out completely.)*

First Name _____ Last Name _____ Date of Birth _____ Age (as of 5/03/2024) Male Female

Street Address _____ City _____ State _____ Zip Code _____

Home Rink/Team _____ ISI Membership # _____ Applying now for ISI membership.

E-Mail Address _____ Phone Number _____

Are you an active USFS member who has competed at or above the Novice level (individual or synchronized) at any USFS National Championship within the last two years? Yes No

INDIVIDUAL EVENTS

Please indicate highest test level registered with the ISI before 03/24/2024:

Tot 1-4 / Pre-Alpha -- Delta / Freestyle 1-10 -- Open Freestyle

Highest test level registered with USFS: _____

- Solo Program (All levels)
- Solo Compulsories (Pre-Alpha -- FS 10)
- Solo Spotlight (All levels)
 - Character
 - Dramatic
 - Light Entertainment
- Solo Theme Spotlight (All levels)
 - Theme: "Land of the Free -- Home of the Brave"
- Stroking (Pre-Alpha -- FS 10)
- Footwork (Freestyle) Dance Level: _____
- Interpretive Spotlight (Freestyle 1-10)
- Artistic (Freestyle 1-10)
- Rhythmic Skating: (Freestyle 1-10)
 - Choose one: Ball Hoop Ribbon
 - Special Skater* Level: _____ (1-10)
 - Figures: Level: _____ (1-10)
- Creative Figures
- Dance Choice: _____
 - Highest level passed: _____ (1-10)
- Open Freestyle
 - Bronze (FS 1-3)
 - Silver (FS 4-5)
 - Gold (FS 6-7)
 - Gold Short (FS 6-7)
 - Platinum (FS 8-10)
 - Platinum Short (FS 8-10)
 - Platinum Plus (FS 8-10)
- Hockey: Skating
 - Puck Handling and Shooting
- Other Event:* _____
- Exhibition: _____

PARTNER EVENTS *(Submit separate form for Group/Team Events!)*

Please note: Both partners must submit individual entry forms.

- Couple Spotlight -- Partner's Name: _____ ISI# _____
 - Character Dramatic Light Entertainment (please choose one)
 - Level: Low (PA-DL) Bronze (FS 1-3) Silver (FS 4-5) Gold (FS 6-7) Platinum (8-10)
- Couple Theme Spotlight - Theme: "Land of the Free -- Home of the Brave"
 - Partner: _____ ISI# _____
 - Level: Low (PA-DL) Bronze (FS 1-3) Silver (FS 4-5) Gold (FS 6-7) Platinum (8-10)
- Couple Level (1-10): _____ Partner: _____ ISI# _____
- Pair Level (1-10): _____ Partner: _____ ISI# _____
- Artistic Pair Pair Level (1-10): _____ Partner: _____ ISI# _____
- Open Pair Level: Bronze Silver Gold Platinum
 - Partner: _____ ISI# _____
- Jump & Spin Partner's Name: _____ ISI# _____
 - Level: Low (PA-DL) Bronze (FS 1-3) Silver (FS 4-5) Gold (FS 6-7) Platinum (8-10)
- Partner Dance*** Partner: .. _____ ISI# _____
- Shadow Dance*** Partner: _____ ISI# _____
- Free Dance*** Partner: _____ ISI# _____
- Pro Partner Dance*** Partner: _____ ISI# _____
- ***Chosen Dance: _____
- Other Event:* _____ Partner: _____
- Exhibition: _____

FEES AND PAYMENT

Team coaches should send one check payable to the Ice Chalet for all entries.

Single entry (Includes 1 individual or partner event): \$ 60.00 _____
or...

Family entry (includes 1 event per family member): \$ 95.00 _____

Each additional individual or partner event ___ events @ \$ 20.00 _____

Late entry fee* \$ 50.00 _____

*Late entries postmarked after 3/24/2024 must be approved by Competition Director.

**Total entry fee
(NO REFUNDS)** _____

I skate at this competition at my own risk and hereby release Ice Chalet - Knoxville, its owners and personnel from all liability. I agree that any photos or video taken of me by ISI or any authorized party may be used by the Ice Chalet for promotional or other reasonable purposes.

Coach's Name _____ Attending the event? Yes No
Professional ISI # _____

Signature of Skater _____ Date _____
Signature of Parent or Guardian (if applicable) _____ Date _____

* Please contact the Competition Director regarding criteria for these events. We are open to accommodations!