

# 2008 IceWorks Halloween Classic

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
As of September 27, 2008

Home Club: \_\_\_\_\_ Female: \_\_\_\_\_ Male: \_\_\_\_\_

USFS #: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Other Phone #: \_\_\_\_\_

Coach Name: \_\_\_\_\_ Coach Phone #: \_\_\_\_\_

Coach's E-mail Address: \_\_\_\_\_

Highest USFS Test (or equivalent) as of September 27, 2008	Moves in the Field	Dance
	Freestyle	Pairs

**For Pairs and Dance Events:**

Partner Name: \_\_\_\_\_

Partner USFS # \_\_\_\_\_ Partner Home Club \_\_\_\_\_

**PLEASE CHECK THE EVENT(S) YOU ARE ENTERING:**

<b>Free Skating</b> <input type="checkbox"/> Masters <input type="checkbox"/> Gold <input type="checkbox"/> Silver <input type="checkbox"/> Bronze <input type="checkbox"/> Pre-Bronze <input type="checkbox"/> No Test	<b>Compulsory Moves</b> <input type="checkbox"/> Masters / Gold <input type="checkbox"/> Silver <input type="checkbox"/> Bronze <input type="checkbox"/> Pre-Bronze <input type="checkbox"/> No Test	<b>Solo Dance</b> <input type="checkbox"/> Gold <input type="checkbox"/> Pre-Gold <input type="checkbox"/> Silver <input type="checkbox"/> Pre-Silver <input type="checkbox"/> Bronze <input type="checkbox"/> Pre-Bronze <input type="checkbox"/> Preliminary	<b>Maneuver Team*</b> <input type="checkbox"/> Masters/Gold <input type="checkbox"/> Silver/Bronze <input type="checkbox"/> Pre-Bronze/No-Test
<b>Pairs</b> <input type="checkbox"/> Masters <input type="checkbox"/> Gold <input type="checkbox"/> Silver <input type="checkbox"/> Bronze <hr style="width: 100%;"/> <b>Spins</b> <input type="checkbox"/> Masters / Gold <input type="checkbox"/> Silver <input type="checkbox"/> Bronze <input type="checkbox"/> Pre-Bronze	<b>Interpretive</b> <input type="checkbox"/> Masters <input type="checkbox"/> Adult <input type="checkbox"/> Duet or Team* <hr style="width: 100%;"/> <b>Moves in the Field</b> <input type="checkbox"/> Junior/Senior <input type="checkbox"/> Masters <input type="checkbox"/> Gold <input type="checkbox"/> Silver <input type="checkbox"/> Bronze <input type="checkbox"/> Pre-Bronze	<b>Original Dance</b> <input type="checkbox"/> Championship <input type="checkbox"/> Gold <input type="checkbox"/> Pre-Gold <hr style="width: 100%;"/> <b>Improvisational Skating</b> <input type="checkbox"/> Gold / Masters <input type="checkbox"/> Adult	<b>Couples Dance</b> <input type="checkbox"/> Gold <input type="checkbox"/> Pre-Gold <input type="checkbox"/> Silver <input type="checkbox"/> Pre-Silver <input type="checkbox"/> Bronze <input type="checkbox"/> Pre-Bronze

\* Individual members of a maneuver team or interpretive duet/team must submit their own application. The team captain must also submit a separate team application for the entire team.

**ENTRY FEES:**

Event	Fee	Total
First Individual Event	\$80.00	
Each Additional Individual Event	\$40.00	
First pair or dance couple event (per couple)	\$80.00	
Each additional pair or dance couple event (per couple)	\$40.00	
Each Member of a Maneuver Team or Interpretive Duet/Team	\$20.00	

**Total Fees = \_\_\_\_\_**

I hereby certify that this skater is a member in good standing of U.S. Figure Skating and the following skating club: \_\_\_\_\_ and is eligible to compete in the specified events under the rules of U.S. Figure Skating. I certify that I am an authorized officer of the skater's home club. (A letter can be provided by the skater's Home Club in place of the signature below).

**Signature of Home Club Official:**

\_\_\_\_\_  
 Signature Date  
 Name (please print): \_\_\_\_\_

Title: \_\_\_\_\_

Accidents (CR 33.06) U.S. Figure Skating and the clubs or organizers of competitions undertake no responsibility for damages or injuries suffered by the skaters or officials. As a condition of acceptance of their entries or participation therein, all entrants, their parents and guardians and officials shall be deemed to agree to assume all risks of injury to their person and property resulting from, caused by or connected with the conduct and management of the competition, and to waive and release any and all claims which they have against any officials, U.S. Figure Skating, the club hosting the competition, and against its Officers, and their entries shall be accepted only on such condition.

\_\_\_\_\_  
 Signature of Competitor: Date

**\*\*\* Application must be postmarked on or before September 27, 2008 \*\*\***  
Reminder: To receive a tentative competition schedule and practice ice registration form, please provide self-addressed, stamped envelope.

**Checks should be made payable to: IceWorks Skating Club**

**Mail To: IceWorks Skating Club  
 c/o Halloween Classic 2008  
 3100 Dutton Mill Road  
 Aston, PA 19014**