

Northern Lights Audition Registration Form 2010-2011

Things to bring to audition:

1. Copy of Birth Certificate
2. US Figure Skating Membership card

If you do not have a USFS membership card please talk to Janna Gates in the office.

3. \$25 Audition fee due day of tryouts

Please make check payable to: TCFSC, please put checks and registration forms in the Open Juv Synchro mailbox in the Club office.

AUDITIONS for Beginner 2, Pre- Juvenile and Open Juvenile/Intermediate

***Please wear proper skating attire and have hair pulled back in a bun.*

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|--|----------------------|---------------------|----------------------|------------------------|----------------------|
| Name | <input type="text"/> | Address | <input type="text"/> | City | <input type="text"/> |
| Zip | <input type="text"/> | Birthdate | <input type="text"/> | Age as of July 1, 2008 | <input type="text"/> |
| US Figure Skating Membership Number | <input type="text"/> | Parent's Email | <input type="text"/> | | |
| Skater's Email | <input type="text"/> | Telephone Number(s) | <input type="text"/> | | |
| Home Club | <input type="text"/> | Coach's Name | <input type="text"/> | <input type="text"/> | |
| Highest Test Levels Passed- | <input type="text"/> | | | | |
| (Basic Skills or Moves, Freestyle and Dance) | <input type="text"/> | | | | |
| Emergency Contact Name & Number (other than parents) | <input type="text"/> | | | | |
| Health Insurance Carrier and Policy Number | <input type="text"/> | Parents Names | <input type="text"/> | | |