GOLDEN BLADES CHAMPIONSHIP OF PITTSBURGH
CENTER ICE ARENA 100 CENTER ICE DR. DELMONT PA 15626 724-468-1100
APRIL 14-15, 2012

__Female __Male _____

Last Name | First Name | E-Mail

_____

Address | Birthday | Age first day of Competition

_____

City | State | Zip | Phone

_____

Home Rink Name | Skater ISI Membership # | Exp. Date

Individual Events: **ISI Test Level:** _____ (Tot 1-4, Pre-Alpha-Delta, FS 1-10)

Solo Program (All levels)
Solo Compulsories (Pre-Alpha -FS10)
Stroking (Tot – Delta)
Footwork (FS 1-10)
Artistic (FS1-10)
Interpretive (FS 1-10)

Solo Spotlight (All levels)
Choose one level
Character
Dramatic
Light Entertainment

Rhythmic (FS1-10)
Ribbon, Hoop, Ball
Solo Dance (1-10) Indicate level: ____
Open Dance: Indicate: _____
(Dance A and/or B)

Open Freestyle: Bronze (FS1-3), Silver (FS4-5), Gold (FS 5-6), Platinum, (FS7-10)

Partner Events

Couples Spotlight Partner's Name: _____ISI#_____ Low (PA-Del) Med (FS1-3)
Character Dramatic Light Entertainment Inter (FS4-5) High (FS6-10)

Jump & Spin Partner's Name: _____ISI#: _____ Low (PA-Del) Med (FS1-3)
Inter (FS4-5) High (FS6-10)

Mixed Dance Partner's Name: _____ISI#: _____ Dance Level (1-10)

Registration Fees are non-refundable. CENTER ICE ARENA reserves the right to limit the number of entries without notice.

I skate at this competition at my own risk and hereby release the host rink(s) and their 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 tapes 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**

_____
Parents Signature (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's Signature_____ **Date**_____

Printed Name _____

Coach's ISI #: _____ **Phone #:** _____

Coach's E-Mail: _____

Coach's Judging Level: _____ _____ _____
Bronze **Silver** **Gold**

Applications will NOT be accepted without the coach's information

Are you an active USFS member who has competed at or above the Novice level at any USFS National Championship with in the past 2 years: Yes No

REGISTRATION FEES

First Event:	$40.00	Late Fee $20.00
Each Additional Event:	$10.00	
Single Tot Event:	$20.00	
Family Entry:	$75.00	

(Covers all Family members' first entry, each additional entry $10.00 per skater)

Family Spotlight, Team, and Synchro Skating Fees on the Team Form

Total amount enclosed: $ _____

Make Checks Payable to: **CENTER ICE ARENA**

ENTRY DEADLINE: MARCH 12, 2012
MAIL COMPLETED ENTRY FORM TO:

GOLDEN BLADES CHAMPIONSHIP OF PITTSBURGH
C/O JOYCE DITOPPA
711 NATHAN DR.
NORTH HUNTINGDON, PA 15642