



BISMARCK FIGURE SKATING *NON-MEMBER* TESTING FEES

Please Circle Tests Being Taken

Skater's Name: _____ USFSA # _____

Club Name: _____ Name of Primary Coach: _____

DANCE			MOVES IN THE FIELD		
PRELIMINARY				Pre-Preliminary	\$20.00
	Dutch Waltz	\$40.00		Preliminary	\$25.00
	Canasta Tango	\$40.00		Pre-Juvenile	\$30.00
	Rhythm Blues	\$40.00		Juvenile	\$35.00
PRE-BRONZE				Intermediate	\$40.00
	Swing Dance	\$45.00		Novice	\$45.00
	Cha Cha	\$45.00		Junior	\$50.00
	Fiesta Tango	\$45.00		Senior	\$55.00
BRONZE			Total for Moves:		
	Hickory Hoedown	\$50.00			
	Willow Waltz	\$50.00	FREE SKATING/ SOLO FREE DANCE		
	Ten Fox	\$50.00		Pre-Preliminary	\$20.00
PRE-SILVER				Preliminary	\$25.00
	Fourteen Step	\$60.00		Pre-Juvenile	\$30.00
	European Waltz	\$60.00		Juvenile	\$35.00
	Foxtrot	\$60.00		Intermediate	\$40.00
SILVER				Novice	\$45.00
	American Waltz	\$60.00		Junior	\$50.00
	Tango	\$60.00		Senior	\$55.00
	Rocker Foxtrot	\$60.00	Total for Free Skate:		
PRE-GOLD					
	Kilian	\$70.00			
	Blues	\$70.00			
	Paso Doble	\$70.00	DANCE TOTAL: _____		
	Starlight Waltz	\$70.00	(Deduct \$10 per dance if your bring your own partner)		
GOLD			MOVES TOTAL: _____		
	Viennese Waltz	\$80.00			
	Westminster Waltz	\$80.00	FREE SKATE TOTAL: _____		
	Quickstep	\$80.00			
	Argentine Tango	\$80.00	REGISTRATION FEE:		
INTERNATIONAL			Non-BFSC Members - \$30.00		
	Rhumba	\$90.00	TOTAL AMOUNT DUE: _____		
	Austrian Waltz	\$90.00			
	Cha Cha Congelado	\$90.00			
	Yankee Polka	\$90.00		
	Ravensburger Waltz	\$90.00	For Office Use Only		
	Tango Romantica	\$90.00	Check #/Cash _____		
	Silver Samba	\$90.00	Amount Paid: _____		
	Golden Waltz	\$90.00	Owes/Credit: _____		
	Midnight Blues	\$90.00			
TOTAL FOR DANCE:			(Please contact Test Chair for International Dances)		

BISMARCK FIGURE SKATING CLUB TESTING APPLICATION FOR NON-BFSC MEMBERS ONLY

DATE OF TEST SESSION:

Friday, May 10, 2019 – Sunday, May 12, 2019

LOCATION:

Capital Ice Complex, 1504 Wichita Dr., Bismarck, ND 58504

TEST FEES:

Test fees must be paid in full before testing, make all checks payable to Bismarck Figure Skating Club or BFSC.

Refunds will be made only with a 72 hour prior notification, or a physician's written excuse is needed.

If conditional test is being taken, please provide a separate check for all higher level conditional tests. This will make the refund process easier for all parties. If the lower level test is not passed and higher level test cannot be taken the conditional check will be given back to the skater.

NOTE: All dance tests must be completed by level. You must pass all dances within the pre-bronze level before you can test dances within the bronze level. Moves level must be passed before Free skate may be taken (Pre-Preliminary Moves must be passed prior to skater taking Pre-Preliminary Free skate)

Priority System: In the event that the test session becomes full, in any respect, priority goes to BFSC members (highest level has priority) followed by non-member applications received at the earliest date.

Partner Practice: We will do our best to accommodate each skater, however, partner practice is not guaranteed. Partner practice will be scheduled in fifteen minute increments and will be assigned using the same priority system as listed above. The amount of time assigned is at the discretion of the partner and BFSC. Partner practice fee is \$21.00/15 minutes and will be paid to BFSC at the time of the lesson. Ice fee is \$25.00/45 minutes of practice ice to be paid to BFSC at the time of the session. Non-member clubs in need of partnering practice must have their **primary coach** contact Emily Zahn at emers59@hotmail.com by the test form deadline date.

USFSA Permission Form:

A USFSA Permission Form must accompany this application form and be signed by the skater's club test chair.

TEST FORMS ARE DUE April 27, 2019. Out of town forms must be postmarked by April 27, 2019. Test Forms Received or Postmarked After April 27, 2019, are not guaranteed to test. Testing will be at the discretion of the test chair, based on type of test and time allotted in the schedule.

All forms and test fees must be received BEFORE skater will be permitted to test.

Mail to Bismarck Figure Skating Club Test Chair:

Suzanne Fuchs

210 W Avenue B

Bismarck ND 58501

Signature of Professional: _____

I grant permission for my son/daughter to participate in this test session. I understand that applicants waive all claims for injury and liabilities for damage or loss of property.

Signature of Parent: _____ **Date:** _____