



SKATE CANADA – CENTRAL ONTARIO SNOWFLAKE SKATE – METRO WEST AREA COMPETITION ENTRY FORM

PART A – FOR SINGLES/SOLO DANCE/SHOWCASE/INTERPRETIVE CATEGORIES:

Please use a separate entry form for each Singles categories entered.

FIRST NAME _____ LAST NAME _____ M/F _____ BIRTHDATE _____ AGE _____
AGE as at November 15, 2008

ADDRESS _____ CITY _____ POSTAL CODE _____

PHONE (____) _____ SC# _____ HOME CLUB _____ CLUB # _____

NAME OF COACH _____ PHONE (____) _____

HIGHEST COMPLETE TEST/BADGE/STAGE PASSED AS AT NOVEMBER 15, 2008 FREESKATE _____ DANCE _____ CANSKATE _____

* do NOT list partial tests – e.g. for Preliminary Dance do not list Dutch Waltz, Canasta Tango and Baby Blues separately – enter "Preliminary" only if all 3 are complete.

SINGLES CATEGORY ENTERED _____

SOLO DANCE CATEGORY ENTERED _____

SHOWCASE/INTERPRETIVE CATEGORY ENTERED _____

ENTRY FEES \$ _____ for Singles/Solo Dance/Showcase/Interpretive Categories (cheque enclosed in this mailing)

All participants cheques are to be made payable to their Home Club (i.e. Thornhill FSC). Postdated cheques will not be accepted. A service charge of \$20.00 will apply to cheques returned by your bank. Each club will be responsible to submit one cheque for all registrations from their club. Club cheques should be made payable to Port Credit Figure Skating Club.

FORWARD ENTRIES TO: Leslie Nadler
Shopper's Drug Mart-Credit Landing
P.O. Box 59543, 228 Lakeshore Road West
Mississauga, ON L5H 4L1
leslienadler@hotmail.com (inquiries only)

ENTRIES MUST BE RECEIVED BY DECEMBER 15, 2008

It is understood and agreed that Skate Canada - Central Ontario and the Port Credit Figure Skating Club shall not be liable for injury or loss occasioned by the Athlete while travelling to or from or during the Snowflake Skate Competition, nor shall Skate Canada - Central Ontario and the Port Credit Figure Skating Club be responsible for any damages or losses caused by the Athlete during the same time. The Athlete and/or Athlete's parent(s)/legal guardian agrees to indemnify Skate Canada - Central Ontario and the Port Credit Figure Skating Club and hold them harmless from any claims or demands in respect of such loss or damage. I also certify that I have read a copy of the Skate Canada - Central Ontario Code of Conduct and that I agree to conform thereto.

Signature of Competitor

Signature of Parent/Guardian

CERTIFICATION OF ELIGIBILITY:

The skater listed above is a member in good standing with the _____ Club and we certify that the information provided is correct.

Signature of Club Official

Office held (Test Chairman or President)

CLUB CONTACT PERSON _____ PHONE (____) _____

* Please provide the name and telephone number of the person who will act as a contact for all skaters from your club.

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PART B – FOR TEAM/DANCE (i.e. Couples, Similar, Family, Biathlon) CATEGORIES:

Please use a separate entry form for each Team/Dance categories entered.

DANCE CATEGORY ENTERED _____ (Couples, Similar, Fours, Family, Biathlon)
TEAM ELEMENTS CATEGORY ENTERED _____
TEAM FORMATION CATEGORY ENTERED _____
TEAM NAME _____
Please list Dance/Team members below.

AGE AND HIGHEST COMPLETE TEST/BADGE/STAGE PASSED AS AT NOVEMBER 15, 2008

NAME	M/F	AGE	HOME CLUB	SC#	FREE SKATE	DANCE	CANSKATE	FEE PAID
TOTAL ENTRY FEES (cheque enclosed in this mailing)								

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PHOTOCOPY AS NEEDED

PLEASE COMPLETE BOTH SIDES OF THIS FORM

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Signatures of Competitors

Signatures of Parent(s)/Guardian(s)

CERTIFICATION OF ELIGIBILITY:

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Event details can be found in the Competition Announcement currently posted at: <http://www.skatecanada-centralontario.com/2008-9%20eventsresults.htm>