

**NZIFSA TEST APPLICATION**

Name: ..... Phone: .....

T/C No: ..... Coach: ..... Home Club: .....

FREE SKATE TEST		
Test Applied for: .....		
Test Fee	\$	45.00
Ice Time Fee	\$	35.00
<b>TOTAL</b>	<b>\$</b>	<b>80.00</b>

STROKING TEST		
Test Applied for: .....		
Test Fee	\$	45.00
Ice Time Fee	\$	45.00
<b>TOTAL</b>	<b>\$</b>	<b>90.00</b>

DANCE TEST		
Test(s) Applied for: .....		Level .....
Test Fee	\$	45.00
Ice Time Fee	\$	35.00
Ice time 2 <sup>nd</sup> Dance	\$	10.00
<b>TOTAL</b>		<b>1 Dance \$ 80.00</b>
		<b>2 Dances \$90.00</b>

Please list names of dance(s) you are testing for:

**TOTAL FEE ENCLOSED**    \$ \_\_\_\_\_

**Please make payment to:**  
**Centaurus Ice Skating Club – direct credit 03 0802 0094985 00 (use 'skater's name test' as reference)**

- Instructions to Skaters:**
- The Skater shall complete the form in consultation with their coach and send it with the appropriate Test plus Ice Time fee, to the Secretary of their Home Club no later than 21 days prior to the test date.
  - **Applications are not valid if they are submitted without the correct fee, PPC (Free Skate only) or without a current T/C number shown.**
  - Skaters withdrawing from a test less than 14 days prior to the test date will incur a \$10.00 administration fee.
  - All fees paid are non-refundable if a skater withdraws from a test less than 7 days prior to the test date for other than medical or bereavement reasons.

<b>PPC:</b>							
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SIGNED ..... DATE .....  
 (Coach)

SIGNED ..... DATE .....  
 (Parent or Skater over 18 years)

**For Club use:**  
 Date Received ..... Payment Received .....