



Test Application

For Office Use: Date Rec'd _____
 \$ _____ Check # _____
 Approved _____

Skater's Name _____ USFS# _____ (Mandatory)
 Address _____ Phone # _____
 City, State _____ Email _____
 Highest Test Passed _____ Home Club _____
 Professional's Name (Printed) _____ (Signature) _____
 Professional's Email _____ Phone # _____
 Signature (Parent/Guardian if under 18) _____

Moves in the Field

Free Skating

Pairs

TEST	FEE	TEST	FEE	TEST	FEE
Pre-Preliminary*	\$15	Pre-Preliminary*	\$10	Preliminary	\$15
Preliminary*	\$20	Preliminary*	\$12	Pre-Juvenile	\$15
Pre-Juvenile	\$25	Pre-Juvenile	\$15	Juvenile	\$18
Juvenile	\$25	Juvenile	\$18	Intermediate	\$20
Intermediate	\$30	Intermediate	\$20	Novice	\$25
Novice	\$30	Novice	\$25	Junior	\$30
Junior	\$35	Junior	\$30	Senior	\$35
Senior	\$35	Senior	\$35		
Adult Pre-Bronze*	\$18	Adult Pre-Bronze*	\$15		
Adult Bronze	\$22	Adult Bronze	\$15		
Adult Silver	\$25	Adult Silver	\$20		
Adult Gold	\$30	Adult Gold	\$25		

* It may be necessary for these tests to be judged by a single test judge.

Dance (Circle each dance) – Indicate adult, master, solo or standard. Fee is per dance.

TEST	FEE	TEST	FEE
Preliminary* - DW, CT, RB	\$12	International – AUS, CON, GW, MB,	\$45
Pre-Bronze* – SD, CC, FIT	\$13	RW, R, SAM, TR, YP	\$45
Bronze* – HH, WIW, TF	\$14	Juvenile Free*	\$15
Pre-Silver – 14S, EW, FT	\$20	Intermediate Free*	\$20
Silver – AW, T, RF	\$25	Novice Free	\$25
Pre-Gold – K, BL, PD, SW	\$30	Junior Free	\$30
Gold – VW, WW, QS, AT	\$35	Senior Free	\$35

Refer to test announcement for application deadline. Applications received after the deadline subject to a \$20 late fee. Skaters who withdraw after the application deadline forfeit test fees unless the test session is canceled or judges cannot be obtained for particular test. All fees must accompany the application. Test schedule will be e-mailed before test session. Arrive one hour before your test time.

Test Fees \$ _____
\$20 Non-Member \$ _____
 Ice Fee \$10.00
 Judges Hospitality \$5.00
TOTAL FEE DUE \$ _____

Please make checks payable to CPFSC. Mail application & payment to: CPFSC, c/o Reneé Greenawalt, Test Chair, 103 Park Place, Camp Hill, PA 17011. In order for tests to be scheduled, *both the application and the fees must be received by the Test Chair no later than the posted Test Deadline date.* Applications submitted without fees will not be scheduled. Skaters may cancel tests but fees are not refundable. Please write any special circumstances or requests on the reverse side of this form. Questions? Contact Reneé Greenawalt at 717-877-8744 or Test_Chair@centralpennfsc.org