

2ND Annual ISI Open Competition

December 2nd & 3rd, 2017

Team Entry Form



Team Name: _____ ISI #: _____ USFS #: _____

Primary Coach: _____ Coach's E-mail: _____

(mandatory)

Coach Phone: _____

Does your synchro team compete in USFS competitions? If so, what level?

Please mark the events and age category in which your team wishes to compete:

Team Events	
Event: (Circle Event) Synchro Formation Synchro Advanced Form Synchro Skating Synchro Open Skating Production Ensemble Family Spotlight (3 or more skaters ONLY)	Age Category (SYNCHRO TEAM ONLY): (circle one) Tots (6 years & younger) Junior Youth (Majority 8 years & younger) Youth (Majority 9-11 years) Senior Youth (Majority 12-14 years) Teen (Majority 14-19 years) Collegiate (Majority 18-25 years) Adult (20 years & Older) Master (40 years & older)

✓ Indicate any member who has competed at or above the Novice level at any USFS National Championship within the last 2 years

	Skater Name	Age on 11/2/17	ISI #	✓USFS		Skater Name	Age on 11/2/17	ISI #	✓USFS
1					13				
2					14				
3					15				
4					16				
5					17				
6					18				
7					19				
8					20				
9					21				
10					22				
11					23				
12					Attach additional sheet if necessary				

Entry Deadline: Nov 2, 2017

Coach or Manager Signature below signifies that you assume the risks inherent in the sport of ice skating and further agree to indemnify, release and hold harmless from all liabilities ISI, participating rinks and their employees, coaches, contractors and volunteers.

Coaches Signature

Print Coaches Name and rink

Entry Fees

_____ Skaters x \$20 per skater

Total Enclosed: _____

Mail or Deliver to
LA KINGS Valley Ice Center
8750 Van Nuys Blvd
Panorama City, Ca 91402
Att: Janet Lee
