

MIT Figure Skating Club

U.S. Figure Skating Test Session Application

Test Date: _____

Name: _____

Email Address: _____

Phone Number: _____

U.S. Figure Skating
Member #: _____

Test(s) to be taken: _____

U.S. Figure Skating
Home Club: _____

Permission from
Home Club (if not MIT): _____

Email of Home Club
Test Chair (if not MIT): _____

Test Fees

Students: \$10 for 1 test, \$5 for each additional test

Non-Student: \$20 for 1 test, \$10 for each additional test

Total: _____

APPLICATION DUE 2 WEEKS PRIOR TO TEST