

Lloyd Center Ice Rink

25th Annual Ice Crystal Classic - ISI Open Competition

November 9th-11th, 2012

☐ Female ☐ Male

ISI#: _____

Name _____	Phone _____	Alternate Phone _____
Address _____	City _____	State _____ Zip _____
Age on 11/01/2012 _____	Birthdate _____	Rink Name _____ Email Address _____
Coach Name _____	Coach Phone _____	Highest Test Passed as of November 1, 2012 _____

Individual Events

Tots-Delta	Freestyle (1-10)	Open Freestyle	Spotlight
<input type="checkbox"/> Solo Program	<input type="checkbox"/> Solo Program	<input type="checkbox"/> Solo Program	<input type="checkbox"/> Character
<input type="checkbox"/> Compulsory	<input type="checkbox"/> Compulsory	<input type="checkbox"/> Shoot the Duck	<input type="checkbox"/> Dramatic
<input type="checkbox"/> Stroking	<input type="checkbox"/> Shoot the Duck	<input type="checkbox"/> Footwork	<input type="checkbox"/> Light Entertainment
<input type="checkbox"/> Shoot the Duck	<input type="checkbox"/> Footwork	<input type="checkbox"/> Artistic	Level: _____
<input type="checkbox"/> Interpretive	<input type="checkbox"/> Artistic	<input type="checkbox"/> Interpretive	
Level: _____	<input type="checkbox"/> Interpretive	<input type="checkbox"/> Rhythmic	Level: _____
	<input type="checkbox"/> Rhythmic	Level: _____	
			<input type="checkbox"/> Solo Dance (1-10)

PARTNERED EVENTS	Partner's Name	F	M	Age	ISI#
<input type="checkbox"/> Couple Level _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> Pair Level _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> Dance Level _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> Free Dance Level _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

Couple Spotlight

☐ Character ☐ Drama ☐ Lt. Entertainment

Partner: _____ ☐ ☐

☐ Low ☐ Medium ☐ Intermediate ☐ High

Please Note: If skating a partnered event, your partner must also fill out his / her own entry form and pay the appropriate entry fee(s). To enter the Family Spotlight event, please use the Team Entry Form.

Registration fees are non-refundable

First Event	\$45.00	\$ _____
First Event (TOTS ONLY)	\$35.00	\$ _____
Additional Event (All events after 1 st)	\$20.00 x # of events ____ =	\$ _____
TOTAL		\$ _____

Make checks payable to Lloyd Center Ice Rink

Returned check fee \$25.00

To pay by Credit Card: ☐ Visa ☐ Mastercard

Credit Card Number

Expiration Date

3-Digit Code

Name on Card (Print)

Signature

I skate this competition at my own risk and hereby release ISI, Lloyd Center Ice Rink, participating rinks, their personnel and contractors from all liabilities. Upon entering this competition, I hereby agree that any photographs or video tapes taken of me by ISI, Lloyd Center Ice Rink, or any authorized party, may be used by the ISI or Lloyd Center Ice rink for promotional purposes.

Signature (Parent's signature if skater is under 18)

Date

Mail Entry forms to: Lloyd Center Ice Rink
Attn: Competition Director
953 Lloyd Center
Portland, OR 97232

Entry Deadline: **October 7th, 2012**
Entry fees double after deadline.

Lloyd Center Ice Rink

25th Annual Ice Crystal Classic - ISI Open Competition

November 9th-11th, 2012

Team Entry Form: Precision, Production, Groups & Teams

Name of Group / Team

Coach (please print)

Rink

Rink's Phone Number

Coach's Email

Coach's Phone number

Alternate Phone

TEAM EVENTS

- | | |
|--|--|
| <input type="checkbox"/> Synchronized Formation Compulsory | <input type="checkbox"/> Family Spotlight |
| <input type="checkbox"/> Synchronized Skating Compulsory | <input type="checkbox"/> Comedy Team |
| <input type="checkbox"/> Team Compusories: Level _____ | <input type="checkbox"/> Ensemble Team |
| <input type="checkbox"/> Synchronized Formation | <input type="checkbox"/> Production Team |
| <input type="checkbox"/> Synchronized Skating | <input type="checkbox"/> Jump Team: Level ____ |
| <input type="checkbox"/> Synchronized Dance | <input type="checkbox"/> Spin Team: Level ____ |

AGE CATEGORY

- | |
|--|
| <input type="checkbox"/> Tot Team (6 & under) |
| <input type="checkbox"/> Jr Youth Team (8 & under) |
| <input type="checkbox"/> Youth Team (9-11) |
| <input type="checkbox"/> Sr Youth Team (12-14) |
| <input type="checkbox"/> Teen Team (14-19) |
| <input type="checkbox"/> Adult Team (20 & over) |

#	Name	Age	ISI Number	#	Name	Age	ISI Number
1				16			
2				17			
3				18			
4				19			
5				20			
6				21			
7				22			
8				23			
9				24			
10				25			
11				26			
12				27			
13				28			
14				29			
15				30			

Registration fees are non-refundable.

All Team Entries are \$15.00 per team member.

Number of Skaters _____ x \$15.00 = _____ TOTAL ENCLOSED

Make checks payable to Lloyd Center Ice Rink

Returned check fee \$25.00

Entry Deadline: October 7th, 2012

Entry fee double after deadline.

To pay by Credit card: ☐ Visa ☐ Mastercard

Credit Card Number

Expiration Date

3-Digit Verification

Name on Card (print)

Signature

I skate this competition at my own risk and hereby release ISI, Lloyd Center Ice Rink, participating rinks, their personnel and contractors from all liabilities. Upon entering this competition, I hereby agree that any photographs or video tapes taken of me by ISI, Lloyd Center Ice Rink, or any authorized party, may be used by the ISI or Lloyd Center Ice rink for promotional purposes.

Signature (Parent's signature if skater is under 18)

Date

Mail Entry forms to: Lloyd Center Ice Rink
Attn: Competition Director
953 Lloyd Center
Portland, OR 97232

Entry Deadline: October 7th, 2012