



Individual Entry Form

The 55th Annual Robert Unger ISI Team Competition May 3-5, 2024 **Entries Due: March 24, 2024**

Return entries to: Ice Chalet
100 Lebanon St.
Knoxville TN 37919

Endorsed by the
Ice Sports Industry!

(865) 588-1858 • icechalet@chaleticerinks.com • www.chaleticerinks.com/competition.htm

Return entry form to your team coach with your entry fee.

All entries must be postmarked by **March 24, 2024**. **Sorry -- NO REFUNDS.**

COMPETITOR INFORMATION (Please print and fill out completely.)

First Name _____ Last Name _____ Date of Birth _____ Age (as of 5/03/2024) ☐ Male ☐ Female
Street Address _____ City _____ State _____ Zip Code _____
Home Rink/Team _____ ISI Membership # _____ ☐ Applying now for ISI membership.
E-Mail Address _____ Phone Number _____

Are you an active USFS member who has competed at or above the Novice level (individual or synchronized) at any USFS National Championship within the last two years? ☐ Yes ☐ No

INDIVIDUAL EVENTS

Please indicate highest test level registered with the ISI before 03/24/2024:

Tot 1-4 / Pre-Alpha -- Delta / Freestyle 1-10 -- Open Freestyle

Highest test level registered with USFS:

- ☐ Solo Program (All levels)
☐ Solo Compulsories (Pre-Alpha -- FS 10)
☐ Solo Spotlight (All levels)
Choose One: ☐ Character
☐ Dramatic
☐ Light Entertainment
☐ Solo Theme Spotlight (All levels)
Theme: "Back to the 80s"
☐ Stroking (Pre-Alpha -- FS 10)
☐ Footwork (Freestyle) Dance Level: _____
☐ Interpretive Spotlight (Freestyle 1-10)
☐ Artistic (Freestyle 1-10)
☐ Rythmic Skating: (Freestyle 1-10)
Choose one: ☐ Ball ☐ Hoop ☐ Ribbon
☐ Special Skater* Level: _____ (1-10)
☐ Figures: Level: _____ (1-10)
☐ Creative Figures
☐ Dance Choice
Dance name: _____
Highest level passed: _____ (1-10)
☐ Open Freestyle
☐ Bronze (FS 1-3)
☐ Silver (FS 4-5)
☐ Gold (FS 6-7)
☐ Gold Short (FS 6-7)
☐ Platinum (FS 8-10)
☐ Platinum Short (FS 8-10)
☐ Platinum Plus (FS 8-10)
Hockey: ☐ Skating
☐ Puck Handling and Shooting
☐ Other Event*: _____
☐ Exhibition: _____

PARTNER EVENTS (Submit separate form for Group/Team Events!)

Please note: Both partners must submit individual entry forms.

- ☐ Couple Spotlight -- Partner's Name: _____ ISI# _____
☐ Character ☐ Dramatic ☐ Light Entertainment (please choose one)
Level: ☐ Low (PA-DL) ☐ Bronze (FS 1-3) ☐ Silver (FS 4-5) ☐ Gold (FS 6-7) ☐ Platinum (8-10)
☐ Couple Theme Spotlight - Theme: "Back to the 80s"
Partner: _____ ISI# _____
Level: ☐ Low (PA-DL) ☐ Bronze (FS 1-3) ☐ Silver (FS 4-5) ☐ Gold (FS 6-7) ☐ Platinum (8-10)
☐ Couple Level (1-10): _____ Partner: _____ ISI# _____
☐ Pair Level (1-10): _____ Partner: _____ ISI# _____
☐ Artistic Pair Pair Level (1-10): _____ Partner: _____ ISI# _____
☐ Open Pair Level: ☐ Bronze ☐ Silver ☐ Gold ☐ Platinum
Partner: _____ ISI# _____
☐ Jump & Spin Partner's Name: _____ ISI# _____
Level: ☐ Low (PA-DL) ☐ Bronze (FS 1-3) ☐ Silver (FS 4-5) ☐ Gold (FS 6-7) ☐ Platinum (8-10)
☐ Mixed Dance*** Partner: .. _____ ISI# _____
☐ Similar Dance*** Partner: _____ ISI# _____
☐ Free Dance*** Partner: _____ ISI# _____
☐ Pro Partner Dance*** Partner: _____ ISI# _____
***Chosen Dance: _____
☐ Other Event*: _____ Partner: _____
☐ Exhibition: _____ Partner: _____

FEES AND PAYMENT

Team coaches should send one check payable to the Ice Chalet for all entries.

Single entry (Includes 1 individual or partner event): \$ 55.00 _____
or...

Family entry (includes 1 event per family member): \$ 95.00 _____

Each additional individual or partner event _____ events @ \$ 20.00 _____

ISI Membership Fee (If not already a member) \$ 15.00 _____

Late entry fee* \$ 50.00 _____

*Late entries postmarked after 3/24/2024
must be approved by Competition Director.

**Total entry fee
(NO REFUNDS)**

I skate at this competition at my own risk and hereby release Ice Chalet - Knoxville, its owners and personnel from all liability. I agree that any photos or video taken of me by ISI or any authorized party may be used by the Ice Chalet for promotional or other reasonable purposes.

Coach's Name _____
Professional ISI # _____
Attending the event? ☐ Yes ☐ No

Signature of Skater _____

Date _____

Signature of Parent or Guardian (if applicable) _____

Date _____

* Please contact the Competition Director regarding criteria for these events. We are open to accommodations!