Team Entry Form

The 49th Annual Robert Unger ISI Team Competition
May 4-6, 2018 Entries Due: April 1, 2018

Return entries to: Robert Unger ISI Team Competition
Ice Chalet - Knoxville
P.O. Box 10668
Knoxville TN 37939-0668

Street Address: 100 Lebanon Street
Knoxville TN 37919

Endorsed by the Ice Sports Industry: 1-3246-2018

phone (865) 588-1858 ● fax (865) 588-7509 ● 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 April 1, 2018. No refunds.

Please print:

Name of Team _____ Phone _____

Rink/Team Represented _____

Rink Address _____ City _____ State _____ Zip _____

Contact Person _____ E-mail Address: _____

Please use a separate Group Entry Form for each event entered. ($ 12.00 per skater unless otherwise noted)

- ❑ Family Spotlight ❑ Show Number?*
  Highest Skill Level of Any of These Skaters:
  ❑ Low (Tots-Delta) ❑ Medium (FS 1-3)
  ❑ Interm. (FS 4-5) ❑ High (FS 6-10)
- ❑ Ensemble ❑ Show Number?*
  Highest Skill Level of Any of These Skaters:
  ❑ Low (Tots-Delta) ❑ Medium (FS 1-3)
  ❑ Interm. (FS 4-5) ❑ High (FS 6-10)
- ❑ Theme Ensemble* ❑ Show Number?*
  Highest Skill Level of Any of These Skaters:
  ❑ Low (Tots-Delta) ❑ Medium (FS 1-3)
  ❑ Interm. (FS 4-5) ❑ High (FS 6-10)
- ❑ Production Number
  ❑ Theme? ❑ Show Number?*

*Show numbers will also be judged, but will be presented in a show format on Sunday!

- ❑ Synchro Formation Compulsories
- ❑ Synchro Formation
- ❑ Synchro Advanced Formation
- ❑ Synchro Skating Compulsories
- ❑ Synchro Skating
- ❑ Synchro Skating Open
- ❑ Synchro Dance Compulsories
- ❑ Synchro Dance
- ❑ Freestyle Synchro
- ❑ Kaleidoskate
- ❑ Theater Production*
- ❑ Team Compulsories: Specify level (1-10) _____

Note - Theme for 2018: Hooray for Hollywood!

Age Category:
- ❑ Tots
- ❑ Junior Youth
- ❑ Youth
- ❑ Senior Youth
- ❑ Teen
- ❑ Collegiate
- ❑ Adult
- ❑ Master

NAME (Please print clearly)	Age as of 7/1/16	Birthdate (Month/Day/Year)	Highest Test Passed (if any)	ISI#	USFS? (See note)
1.					❑
2.					❑
3.					❑
4.					❑
5.					❑
6.					❑
7.					❑
8.					❑
9.					❑
10.					❑
11.					❑
12.					❑
13.					❑
14.					❑
15.					❑
16.					❑
17.					❑
18.					❑
19.					❑
20.					❑

USFS? Indicate with check mark any team member who has competed at or above the Novice level (individual or synchronized) at any USFS National Championship within the last two years.

All fees $12.00/skater. Group leader should submit one check payable to "Ice Chalet." Total : $ _____

I have notified all team members that they skate at their own risk & hereby release the Ice Chalet, its owners & personnel from all liability.

Date_____ Signature of Coach_____