

FROSTY BLADES 2025 ISI COMPETITION <> INDIVIDUAL ENTRY FORM

Name _____ Phone Number _____
 Age as of February 7, 2025 _____ Birthdate _____ Sex M/F
 Address _____
 City, State, Zip _____
 Email for Frosty Blades Communications _____
 Home Rink _____ ISI Member # _____ Exp Date _____
 ISI Test Level as of Dec 16, 2024 _____ USFS FS Test Level _____
 Are you an active member of USFS that has competed at or above the Novice Level for ANY USFS National Championships within the last two years? Yes _____ No _____

Please fill in the events you wish to compete in:

<u> </u> Freestyle		<u> </u> Freestyle		<u> </u> Compulsory	
Tot 1, 2, 3, 4 Pre Alpha– Delta		FS 1 – FS 10		Pre-Alpha – FS10	
<u> </u> Footwork	<u> </u> Open Freestyle	<u> </u> Open Short	<u> </u> Artistic	<u> </u> Stroking	
<u> </u> Bronze	<u> </u> Bronze	<u> </u> Gold	<u> </u> Bronze	<u> </u> Pre Alpha	
<u> </u> Silver	<u> </u> Silver	<u> </u> Platinum	<u> </u> Silver	<u> </u> Alpha	
<u> </u> Gold	<u> </u> Gold		<u> </u> Gold	<u> </u> Beta	
<u> </u> Platinum	<u> </u> Platinum		<u> </u> Platinum	<u> </u> Gamma	
	<u> </u> Platinum Plus			<u> </u> Delta	

Rhythmic

 Hoop <> Bronze, Silver, Gold, Platinum _____ **Special Skater** (1 -10) indicate level

 Ball <> Bronze, Silver, Gold, Platinum

 Ribbon <> Bronze, Silver, Gold, Platinum

Solo Spotlight

 Light Entertainment <> Tots - Delta, Bronze, Silver, Gold, Platinum

 Character <> Tots – Delta , Bronze, Silver, Gold, Platinum

 Dramatic <> Tot - Delta, Bronze, Silver, Gold, Platinum

Couples Theme Spotlight <> Partners Name _____ **ISI #** _____ **Age(2/7/2025)** _____

Skaters may only enter 1 couple spotlight event

 Low, Bronze / FS1 – FS3, Silver / FS 4 – FS5, Gold / FS6 – FS 7, Platinum FS 8 – FS 10

Jump and Spin <> Partners Name _____ **ISI #** _____ **Age(2/7/2025)** _____

 Low, Bronze / FS1 – FS3, Silver / FS 4 – FS5, Gold / FS6 – FS 7, Platinum FS 8 – FS 10

ENTRY FEE'S **MUST ADD \$15.00 Processing Fee per entry form if submitting paper registration

First Event	\$85	Paper Registration Fee	+\$15.00
All Additional Events	\$25	TOTAL FEE ENCLOSED \$	_____
Couples Spot per skater if only event	\$40	Checks payable to: National Sports Center	
Jump and Spin per skater if only event	\$40	*ISI District 10 fee included.	
There is no family discount for this competition		\$40 late fee must be included for all applications.	
		Post-marked on Dec 17,2024 or later.	

PARENT/SKATER VERIFICATION ~ must be completed <> I skate at this competition at my own risk for the _____ Team, I release ISI, the host facility, and its' personnel from all liability.
 _____ Date _____
 Signature of Skater _____ Signature of Parent/Guardian _____

COACH VERIFICATION ~ must be completed <>I declare the information on this entry to be true and correct.
 I understand that the coaches of competing students are required to serve as competition judges.

CIRCLE JUDGE CERTIFICATION LEVEL / Bronze Silver Gold Synchro 2024 Update

_____ Date _____

Printed Coaches Name _____ Signature of Coach _____
 ISI Professional # _____ Exp date _____
 Email Address (primary communication method) _____

TEAM LIASON VERIFICATION ~ must be completed <> I declare the information on this entry to be true and correct.
 _____ Date _____
 Printed Name _____ Signature _____
 Email Address _____ Phone Number _____
 ISI Professional # _____ Expiration date _____