



**2009-10 Synchro Tryout Registration Form
Sunday, May 31, 2009**

Parent Meeting (required for all parents) **3-4 p.m.**
Clinic (required for skaters not on the 2008-09 IceStars teams) **4:15-5 p.m.**

Tryouts

Beginner 1 (ages 6-9, new to synchro) **5-5:30 p.m.**
Beginner 2/Preliminary (formerly Youth Formation) **5:30-6:15 p.m.**
Pre-Juvenile/Juvenile (formerly Youth Synchro) **6:15-7:15 p.m.**
Open Juvenile (formerly Senior Youth or Teen Synchro) **7:15-8:15 p.m.**

Current IceStars skaters should attend the tryout of their 08-09 team level,
and may be asked to stay for another tryout level.

Please complete and return this form to IcePlex Guest Services on or before Tuesday, May 26, 2009.
Include \$20 registration fee (make checks payable to Village of Pleasant Prairie)

Skater's Name: _____

Parent's Name (if under 18 years old): _____

Parent's email address (critical for communication): _____

Mailing Address: _____

City, State & Zip Code: _____

Phone Number: _____ Cell Number: _____

Skater's Age: _____ Skater's birth date: _____

Highest Test Level(s) passed:

USFS Moves in the Field: _____ USFS Freestyle: _____

ISI Freestyle: _____ Number of years of synchro experience: _____

CEFSC member _____ Yes _____ No, but belong to (other club name) _____

Highest level synchronized skating team: _____ Last year skated: _____

Check here _____ if you are interested in a limited travel team (2-3 competitions in WI and/or IL).

Check here _____ if you are interested in a travel team (4-6 competitions, possibly in MI, WI, IA, MN).

Skater's Printed Name: _____ Signature: _____ Date: _____

Legal Guardian/Parent Printed Name: _____ Signature: _____ Date: _____

NOTE: All skaters must complete and sign the attached liability waiver form.