

Test and Competition Registration Form

For skaters wishing to compete in NZIFSA sanctioned championships or NZIFSA medal tests.



NEW ZEALAND ICE FIGURE SKATING ASSOCIATION, INC.

Enquiries: tcsecretary@nzifsa.org.nz

INSTRUCTIONS

- Please read the NZIFSA Privacy Policy, Constitution, and the Rules & Regulations on the NZIFSA website (www.nzifsa.org.nz/rules/).
- If you are registering for the first time please provide copies of official documents that establish your identity (name, date of birth, and citizenship/residency status). The NZIFSA reserves the right to request certified copies or to view the originals of these documents.
- Complete all sections of this form and update/correct any pre-printed information that is incorrect.
- You must be a member of a skating club affiliated to the NZIFSA before your registration can be processed.
- The registration fee is \$75.00 . **Please make payment to your home Club.** Registration is valid until 31 March the following year.
- Sign and date the form. **Return the completed form together with payment to your Club Secretary.** TC registration fees are non-refundable.

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|---|----------------------|--------------|----------------------|--------|-----------------------------------|
| Skater's T.C. Registration Number (NZIFSA/CLUB USE ONLY) | <input type="text"/> | Fee Received | <input type="text"/> | Year : | <input type="text" value="2017"/> |
|---|----------------------|--------------|----------------------|--------|-----------------------------------|

1. Enter your personal details:

| | |
|---|--|
| Title (<i>circle answer</i>) | <input type="text" value="Miss / Mrs / Ms / Mr / Dr / other"/> |
| Legal First/given names | <input type="text"/> |
| Legal Family name/last name/surname | <input type="text"/> |
| Preferred First name | <input type="text"/> |
| Date of birth (adult skaters 25 and over enter "25+") | <input type="text"/> |
| Gender | <input type="checkbox"/> Female <input type="checkbox"/> Male |

2. What is your citizenship/residency status in New Zealand?

NZ Citizen (born in New Zealand or granted citizenship)

NZ Permanent Resident – my country of citizenship is

Other – my country of citizenship is

3. Contact Details (most correspondence will be by email. This should be a parent's email address for skaters under 18 years of age):

| | | | |
|-------------------------|----------------------|----------------------|--|
| Street/P.O. Box Address | <input type="text"/> | | |
| Suburb/RD | <input type="text"/> | | |
| City | Postal Code | <input type="text"/> | |
| Region/Province/State | Country | <input type="text"/> | |
| Daytime Phone | Evening or A/H Phone | <input type="text"/> | |
| Mobile | Fax | <input type="text"/> | |
| Parent's E-mail Address | <input type="text"/> | | |
| Emergency Contact | Phone | <input type="text"/> | |

4. Skating Information:

Test/Competition Class Standard Adult Recreational

Home Skating Club

Principal Coach

Secondary Coach Choreographer

5. Signatures: I/We agree to be bound to the NZIFSA Constitution, Code of Ethics, Policy, and the Rules and Regulations. See: www.nzifsa.org.nz/rules/

| | | | |
|-----------------|----------------------|------|----------------------|
| Skater/Parent | <input type="text"/> | Date | <input type="text"/> |
| Club Secretary | <input type="text"/> | Date | <input type="text"/> |
| Amount Enclosed | | \$ | <input type="text"/> |