



Test Application

Only complete applications with full payment will be accepted.

THERE ARE NO REFUNDS OR CREDITS.

Test Date: _____ (Application MUST be received by **2 weeks** prior to test date to be considered for a test)

Name: _____ Gender: _____

USFS #: _____ Home Club: _____

Phone Number: _____ Email: _____

Coach Signature (required): _____

Club Officer Signature (required): _____

Please check all tests desired and circle payment type: ASC for home club, NHC for non-home club members

SINGLES - STANDARD			SKATING SKILLS - STANDARD			DANCE		
	ASC	NHC		ASC	NHC		ASC	NHC
<input type="checkbox"/> Pre-Preliminary	\$25	\$35	<input type="checkbox"/> Pre-Preliminary	\$25	\$35	<input type="checkbox"/> Preliminary	\$20	\$30
<input type="checkbox"/> Preliminary	\$30	\$40	<input type="checkbox"/> Preliminary	\$30	\$40	<input type="checkbox"/> Dutch Waltz	\$20	\$30
<input type="checkbox"/> Pre-Bronze	\$30	\$40	<input type="checkbox"/> Pre-Bronze	\$30	\$40	<input type="checkbox"/> Canasta Tango	\$20	\$30
<input type="checkbox"/> Bronze	\$35	\$45	<input type="checkbox"/> Bronze	\$35	\$45	<input type="checkbox"/> Rhythm Blues	\$20	\$30
<input type="checkbox"/> Pre-Silver	\$35	\$45	<input type="checkbox"/> Pre-Silver	\$35	\$45	Pre-Bronze		
<input type="checkbox"/> Silver	\$40	\$50	<input type="checkbox"/> Silver	\$40	\$50	<input type="checkbox"/> Swing Dance	\$20	\$30
<input type="checkbox"/> Pre-Gold	\$45	\$55	<input type="checkbox"/> Pre-Gold	\$45	\$55	<input type="checkbox"/> Cha-Cha	\$20	\$30
<input type="checkbox"/> Gold	\$45	\$55	<input type="checkbox"/> Gold	\$45	\$55	<input type="checkbox"/> Fiesta Tango	\$20	\$30
						Bronze		
						<input type="checkbox"/> Hickory Hoedown	\$25	\$35
						<input type="checkbox"/> Ten Fox	\$25	\$35
						<input type="checkbox"/> Willow Waltz	\$25	\$35
SINGLES - ADULT			SKATING SKILLS - ADULT			Pre-Silver		
	ASC	NHC		ASC	NHC	<input type="checkbox"/> European	\$25	\$35
<input type="checkbox"/> Pre-Bronze	\$30	\$40	<input type="checkbox"/> Pre-Bronze	\$30	\$40	<input type="checkbox"/> Fox Trot	\$25	\$35
<input type="checkbox"/> Bronze	\$35	\$45	<input type="checkbox"/> Bronze	\$35	\$45	<input type="checkbox"/> 14 Step	\$25	\$35
<input type="checkbox"/> Silver	\$40	\$50	<input type="checkbox"/> Silver	\$40	\$50	Silver		
<input type="checkbox"/> Gold	\$50	\$60	<input type="checkbox"/> Gold	\$50	\$60	<input type="checkbox"/> American Waltz	\$30	\$40
						<input type="checkbox"/> Rocker Fox Trot	\$30	\$40
						<input type="checkbox"/> Tango	\$30	\$40
INTERNATIONAL DANCE			CANADIAN TESTS			Pre-Gold		
	ASC	NHC				<input type="checkbox"/> Blues	\$30	\$40
<input type="checkbox"/> Rhumba	\$45	\$55	Prior arrangement with Test Chair required.			<input type="checkbox"/> Killian	\$30	\$40
<input type="checkbox"/> Australian Waltz	\$45	\$55	All Canadian fees paid in Canadian funds.			<input type="checkbox"/> Paso Doble	\$30	\$40
<input type="checkbox"/> Cha Cha	\$45	\$55	ASC Canadian Test surcharge of \$25.00 in U.S. Dollars, paid to the ASC applied.			<input type="checkbox"/> Starlight Waltz	\$30	\$40
<input type="checkbox"/> Midnight Blues	\$45	\$55				Gold		
<input type="checkbox"/> Yankee Polka	\$45	\$55				<input type="checkbox"/> Argentine Tango	\$35	\$45
<input type="checkbox"/> Ravensburger Waltz	\$45	\$55	Please indicate the Canadian test requested			<input type="checkbox"/> Quick Step	\$35	\$45
<input type="checkbox"/> Tango Romantica	\$45	\$55	<input type="checkbox"/> _____			<input type="checkbox"/> Viennese Waltz	\$35	\$45
<input type="checkbox"/> Silver Samba	\$45	\$55				<input type="checkbox"/> Westminster Waltz	\$35	\$45
<input type="checkbox"/> Golden Waltz	\$45	\$55						
FREE DANCE - SOLO - STANDARD			TEST PARTNER INFORMATION: (if applicable)					
	ASC	NHC						
<input type="checkbox"/> Bronze	\$30	\$40	Name: _____					
<input type="checkbox"/> Pre-Silver	\$30	\$40	Gender: _____ USFS #: _____					
<input type="checkbox"/> Silver	\$30	\$40						
<input type="checkbox"/> Pre-Gold	\$30	\$40						
<input type="checkbox"/> Gold	\$35	\$45						

Total Test Fees: \$ _____

*Registration Fee: \$ _____

+ Any Additional Fees: \$ _____

Total Fee: \$ _____

Application and payment to: **Amherst Skating Club, Attn: Test Chair**
1615 Amherst Manor Dr., Williamsville NY 14221
Please make checks payable to: **"Amherst Skating Club"**
*Registration Fee: **ASC Member - \$10.00**
Non-Home Club - \$20.00

There will be a \$25.00 fee for returned checks.
Late applications may be accepted at the discretion of the Test Chair and subject to a \$25.00 late fee.
ASC reserves the right to accept or decline non-home club application due to scheduling restrictions.