

# BRACKNELL OPEN 2011



## SINGLES/SOLO ARTISTIC ENTRY FORM A

**Event 1-22 and 26-29 only, please use Form B for pairs and group artistic**

PLEASE COMPLETE AND RETURN TOGETHER WITH ENTRY FEE, **NO LATER THAN:- Friday 1st April**

To: - Jo Boland, 14 Hogarth Avenue, Reading, Berkshire.RG30 4QW

CHEQUES OR POSTAL ORDERS SHOULD BE MADE PAYABLE TO **BRACKNELL ICE SKATING CLUB**.

PLEASE WRITE COMPETITOR'S NAME & EVENT LEVEL ON THE BACK OF EACH CHEQUE OR POSTAL ORDER.

Event Number \_\_\_\_\_ Event Level \_\_\_\_\_

Name \_\_\_\_\_

NISA number \_\_\_\_\_ Club/Rink \_\_\_\_\_

Date of birth \_\_\_\_\_ Age on 1<sup>st</sup> July 2010 (for talent ID) \_\_\_\_\_

Address \_\_\_\_\_

Phone number \_\_\_\_\_

Email address \* \_\_\_\_\_

\*Essential as all correspondence will be by email and/or BISC website

Licensed coach name \_\_\_\_\_ NISA number \_\_\_\_\_

Date of field moves seminar attended by coach \_\_\_\_\_

Venue of field moves seminar attended by coach \_\_\_\_\_

Current NISA Test Level

Skate UK Gold (if highest test held)\*\* Date \_\_\_\_\_

Field moves \_\_\_\_\_ Date \_\_\_\_\_

Elements \_\_\_\_\_ Date \_\_\_\_\_

Free \_\_\_\_\_ Date \_\_\_\_\_

Competitive Tests Short \_\_\_\_\_ Date \_\_\_\_\_ Long \_\_\_\_\_ Date \_\_\_\_\_

Tests pending before closing date \_\_\_\_\_

**I ENCLOSE THE CORRECT ENTRY FEE - Event1-22, 26-29 - SINGLES & SOLO ARTISTIC - £20.00**

I HAVE COMPLETED MY EMAIL ADDRESS.

I AM FIT TO SKATE IN THIS EVENT AND THERE IS NO KNOWN MEDICAL REASON TO PREVENT ME FROM SKATING.

I DECLARE THAT I HOLD CURRENT MEMBERSHIP OF NISA.

I AGREE TO ABIDE TO THE RULES AND REGULATIONS OF THE COMPETITION ENTERED.

I CONSENT TO BEING PHOTOGRAPHED BY THE OFFICIAL PHOTOGRAPHER.

\*\* I ENCLOSE A PHOTOCOPY OF SKATE UK PASSPORT (IF APPLICABLE).

SIGNATURE (Parent if under 18) \_\_\_\_\_ Date \_\_\_\_\_

FOR OFFICIAL USE ONLY –

Date received \_\_\_\_\_ Cheque number \_\_\_\_\_ Cheque amount \_\_\_\_\_ Entry Correct \_\_\_\_\_



# BRACKNELL OPEN 2011

## PAIRS/GROUP ARTISTIC ENTRY FORM B

**Event 23-25 and 30 only, please use Form A for singles and solo artistic**

PLEASE COMPLETE AND RETURN TOGETHER WITH ENTRY FEE, **NO LATER THAN:- Friday 1st April**

To: - Jo Boland, 14 Hogarth Avenue, Reading, Berkshire.RG30 4QW

CHEQUES OR POSTAL ORDERS SHOULD BE MADE PAYABLE TO **BRACKNELL ICE SKATING CLUB**.

PLEASE WRITE COMPETITOR'S NAME & EVENT LEVEL ON THE BACK OF EACH CHEQUE OR POSTAL ORDER.

Event Number \_\_\_\_\_ Event Level \_\_\_\_\_

Names 1. \_\_\_\_\_ NISA no. \_\_\_\_\_  
2. \_\_\_\_\_ NISA no. \_\_\_\_\_  
3. \_\_\_\_\_ NISA no. \_\_\_\_\_  
4. \_\_\_\_\_ NISA no. \_\_\_\_\_

Club/Rink \_\_\_\_\_ Phone number \_\_\_\_\_

Email address \* \_\_\_\_\_

\*Essential as all correspondence will be by email and/or BISC website

Licensed coach name \_\_\_\_\_ NISA number \_\_\_\_\_

Date of field moves seminar attended by coach \_\_\_\_\_

Venue of field moves seminar attended by coach \_\_\_\_\_

**Classes 23-25 only – do not complete for class 30**

Date of birth 1. \_\_\_\_\_ 2. \_\_\_\_\_

Ages on 1<sup>st</sup> July 2010 (for talent ID) 1. \_\_\_\_\_ 2. \_\_\_\_\_

Current NISA Test Level (PAIRS ONLY)

Field moves 1. \_\_\_\_\_ Date \_\_\_\_\_ Field moves 2. \_\_\_\_\_ Date \_\_\_\_\_

Elements 1. \_\_\_\_\_ Date \_\_\_\_\_ Elements 2. \_\_\_\_\_ Date \_\_\_\_\_

Free 1. \_\_\_\_\_ Date \_\_\_\_\_ Free 2. \_\_\_\_\_ Date \_\_\_\_\_

Pairs (state whether new or old Pairs test) 1. \_\_\_\_\_ Date \_\_\_\_\_

2. \_\_\_\_\_ Date \_\_\_\_\_

Tests pending before closing date \_\_\_\_\_

**WE ENCLOSE THE CORRECT ENTRY FEE - Event 23-25 & 30 Pairs & Group Artistic - £36.00**

WE HAVE COMPLETED AN EMAIL ADDRESS.

WE ARE FIT TO SKATE IN THIS EVENT AND THERE IS NO KNOWN MEDICAL REASON TO PREVENT US FROM SKATING.

WE ENCLOSE SKATE UK PASSPORT (if applicable) please note all competitors must have passed a minimum of Skate UK Gold.

WE DECLARE THAT WE HOLD CURRENT MEMBERSHIP OF NISA.

WE AGREE TO ABIDE TO THE RULES AND REGULATIONS OF THE COMPETITION ENTERED.

WE CONSENT TO BEING PHOTOGRAPHED BY THE OFFICIAL PHOTOGRAPHER.

SIGNATURES (Parents if under 18) \_\_\_\_\_

DATE \_\_\_\_\_

FOR OFFICIAL USE ONLY –

Date received \_\_\_\_\_ Cheque number \_\_\_\_\_ Cheque amount \_\_\_\_\_ Entry Correct \_\_\_\_\_