



2008 Peach Open Practice Ice Reservation Form

Name: _____ Phone: (____) _____

E-mail address: _____ Parent/Guardian: _____

Home club: _____ USFSA #: _____

Professional's name: _____ Phone: (____) _____

Professional's e-mail: _____ Pair/Dance Partner: _____

Local Accommodations: _____

Approximate Arrival Day/Time: _____

Preferences: _____

Preferences will try to be accommodated but not guaranteed. Moving practice ice sessions is at the discretion of the practice ice chair or practice ice monitor.

CIRCLE the Events you are Entering				
FREESKATE		DANCE	SOLO DANCE	SHOWCASE
No-Test A	Intermediate Short	Pre-Juv. Event 1	Preliminary	Pre-Preliminary
No-Test B	Intermediate Free	Pre-Juv. Event 2	Pre-Bronze	Preliminary
Pre-Pre A	Novice Short	Juvenile Comp.	Bronze	Pre-Juvenile
Pre-Pre B	Novice Free	Juvenile Free	Pre-Silver	Juvenile
Preliminary	Junior Short	Intermed. Comp.	Silver	Intermediate
Pre-Juvenile	Junior Free	Intermed. Free	Pre-Gold	
Juvenile	Senior Short	Novice Comp.	Gold	
Open Juvenile	Senior Free	Novice		
SPINS		COMP. MOVES	PAIRS	
No-Test	Intermediate	No-Test	Preliminary	Junior Short
Pre-Preliminary	Novice	Pre-Preliminary	Pre-Juvenile	Junior Free
Preliminary	Junior	Preliminary	Juvenile	Senior Short
Pre-Juvenile	Senior	Pre-Juvenile	Intermediate	Senior Free
Juvenile		Juvenile	Novice Short	
Open Juvenile		Open Juvenile	Novice Free	

DO NOT MAIL THIS WITH YOUR REGISTRATION FORM.

PLEASE SEND PRACTICE ICE FORM AND CHECK TO:

**Marianne Campbell
182 Windcroft Lane
Acworth, GA 30101**

*For questions concerning practice ice, you may e-mail:
hssoupteacher@yahoo.com
or call (678)467-4246.*

All long distance calls will be returned after 9 p.m. EST or on week-ends. The practice ice schedule will be available on the GaFSC website no later than the week prior to competition.

*****There will be a \$25.00 NSF fee for all returned checks.****

_____ 20-min sessions @\$10.00 = _____ check made payable to GaFSC.