

TEAM INFORMATION *(Please fill-out the form CAREFULLY and COMPLETELY. Make sure that the spellings are correct)*
Team Name _____

(to be printed in program and certificate)
Email Add _____

Rink _____

Coach _____

Mobile No. of Representative _____

TEAM EVENTS
 Family Spotlight

 Ensemble

 Production Team

 Pattern Team

TEAM MEMBERS

No.	Skaters Name	Age	ISI No.
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

No.	Skaters Name	Age	ISI No.
1			
2			
3			
4			
5			
6			
7			
8			
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11			
12			
13			
14			
15			

REGISTRATION FEES
Team Event (/skater): _____ x Php 1,500 = TOTAL Php _____

Note: Membership must be current through event. All test and memberships must be registered with the ISIAAsia office in HongKong. You may also settle your payment at the SM ISR Cashier.

There will be NO REFUNDS. I declare that the information above is true and that all skaters have a current Individual or Professional Membership in ISI Asia. I have notified all team members that they skate at their own risk at this competition, and hereby release ISIAAsia, the rink owner, management, staff, & event organizers from all liability for any accident or injury. I hereby AGREE that any photography or videos taken of our team by the event organizers or authorized parties may be used exclusively for any purpose by the aforesaid parties.

 Registered Coaches Printed Name and Signature

 Date