

**MIT Figure Skating Club**  
**U.S. Figure Skating Test Session Application**

Test Date: \_\_\_\_\_

Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

U.S. Figure Skating Member #: \_\_\_\_\_

Test(s) to be taken: \_\_\_\_\_

(If applicable, partner's name: \_\_\_\_\_)

Coach's signature: \_\_\_\_\_

Home Club (if not MIT): \_\_\_\_\_

Home Club Test Chair Email: \_\_\_\_\_

**Test Fees**

Students: \$10 for 1 test, \$5 for each additional test

Non-Student: \$20 for 1 test, \$10 for each additional test

Total: \_\_\_\_\_

**Application due 12 weeks prior to test date**