



## Figure Skating Competition Registration Form

Local: \_\_\_\_\_

Head Coach: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Assistant Coach: \_\_\_\_\_

Assistant Coach: \_\_\_\_\_

**NOTE: Required Ratio for Figure Skating Competition is 1 coach for every 3 athletes.  
Please ensure you register enough coaches to meet that ratio  
\*\*Please copy additional sheets as necessary**

Please indicate if the athlete will be competing in the developmental competition (CanSkate) and their approximate CanSkate level, or the Figure Skating competition and their level.

	ATHLETE NAME	DOB (mm/dd/yy)	GENDER (M/F)	LEVEL
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				