

TRI -STATE SYNCHRONIZED TEAM SKATING CHAMPIONSHIPS

Hosted by the Dearborn Figure Skating Club

Saturday, February 11, 2006

Dearborn Ice Skating Center
14900 Ford Road
Dearborn, MI 48126

The Dearborn Figure Skating Club will host the 31st annual Tri-State Synchronized Team Skating Championships at the Dearborn Ice Skating Center in Dearborn, Michigan on Saturday, February 11th, 2006. This competition has been sanctioned by U.S.F.S.A. and will be conducted in accordance with the rules set forth in the 2005-2006 edition of the U.S.F.S.A. rulebook.

APPLICATIONS

All applications must be postmarked no later than December 17th, 2005. Each team must submit a typed list of all team members' and alternates' names, birth dates, and U.S.F.S.A. identification numbers. Use the enclosed team roster form. Mail completed applications to:

JoAnn Eastman
42545 White Hart Blvd.
Canton, MI 48188

FEES

The entry fee for each event is \$85 per team plus \$20 per competitor, including alternates. All fees are due when applications are submitted and must be payable in U.S. dollars only. There will be no refunds under any circumstances. Please make checks payable to: Dearborn Figure Skating Club.

PRACTICE ICE

The DISC is a dual surface facility. The rink being used measures 85'x200'. Practice ice segments will be available on Friday, February 10, 2006 from 5 pm until 11:45 pm on a first-come, first-served basis using the enclosed practice ice form. The fee will be \$85 per 15 minute segment. All teams will be able to skate their entire program on the warm-up rink prior to skating their program on the competition rink on Saturday, February 11, 2006.

AWARDS

Awards will be made on the basis of final placement. All team members of teams placing first through fourth will be awarded medals.

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MUSIC

All teams must have two (2) tapes or (2) CDs for each program they will be skating. If practice ice is being purchased, an additional tape or CD will need to be turned in at the practice session. All other tapes and CDs will be turned in at registration.

REGISTRATION

The registration table will be maintained in the ice arena lobby, Friday evening and Saturday. The coach or team manager for each team must register and pick up their team packet. The (2) tapes or (2) CDs per program per team must be turned in at registration in order to receive team packets.

SOUVENIRS

Competition pins, clothing, and programs will be available at the competition.

FOOD

The concession stand will be open during the competition. Maps for area restaurants will be available at registration.

ACCOMMODATIONS

Refer to the enclosed listing for hotels within the Dearborn area.

YOU MAY REPRODUCE ANY FORMS THAT YOU NEED.

FOR ADDITIONAL INFORMATION CONTACT:

JoAnn Eastman
42545 White Hart Blvd.
Canton, MI 48188
Phone: 734-397-3408
Email: eastmanjo1@aol.com
Fax:

THE DEADLINE IS DECEMBER 17, 2005

**TRI - STATE SYNCHRONIZED TEAM SKATING
CHAMPIONSHIPS
SATURDAY, FEBRUARY 11, 2006**

DIVISIONS

Beginner: All skaters on the team must either be full US Figure Skating members or members of the US Figure Skating Basic Skills program. The team may choose to represent a US Figure Skating club or their Basic Skills Program / Club. In order for the team to be eligible for this event, no skaters on the team may have passed higher than the preliminary or adult bronze test in any discipline. There are no age requirements or restrictions for this event. Skaters may be of any age. Teams must be comprised of 8 – 16 skaters. Teams will skate a program to music of their choice 1-1/2 – 2 minutes. There are no restrictions or requirements on music choice.

Preliminary: A team of 8-16 skaters. At least seventy-five percent (75%) of the team must be nine (9) years or younger on the preceding July 1. Up to twenty-five percent (25%) of the team may be eleven (11) years of age or younger on the preceding July 1. (Time 2:00 minutes.)

Pre-Juvenile: A team of 8-12 skaters. The majority of the team must be eleven (11) years or younger on the preceding July 1. (Time 2:00 minutes.)

Open Juvenile: A team of 8-12 skaters. The majority of the team must be 18 years of age or younger on the preceding July 1. (Time 2:30 minutes.)

Juvenile: A team of 12-20 skaters. Skaters must be 12 years of age or younger on the preceding July 1. (Time 3:00 minutes.)

Intermediate: A team of 12-20 skaters. Skaters must be 15 years of age or younger on the preceding July 1. There can be no crossovers to the novice, junior, or senior teams. (Time 3:30 minutes.)

Novice: A team of 12-20 skaters. Skaters must be 14 years of age or younger on the preceding July 1. (Time 3:30 minutes.)

Open Junior: A team of 12-20 skaters. Skaters must be at least 12 years of age with the majority of the skaters 18 years of age or younger on the preceding July 1. There can be no crossovers to junior or senior teams. (Time 4:00 minutes.)

Junior: A team of 12-20 skaters. Skaters must have reached the age of 12 and must not have reached the age of 19 on the preceding July 1. **Jr. Short Program** (Time 2:40 minutes.) **Jr. Free Skating** (Time 4:00 minutes.)

Senior: A team of 12-20 skaters. Skaters must have reached 14 years of age on the preceding July 1.

Sr. Short Program (Time 2:40 minutes.) **Sr. Free Skating** (Time 4:30 minutes.)

Adult: A team of 12-20 skaters. Skaters must be 21 years of age on the preceding July 1, with the majority of the skaters 25 years of age or older. (Time 3:30 minutes.)

Masters: A team of 12-20 skaters. Skaters must be at least 25 years of age on the preceding July 1 with the majority 35 years of age or older. (Time 3:00 minutes.)

Open Adult: A team of 8-12 skaters. The majority of the team must be 19 years of age or older on the preceding July 1. (Time 2:30 minutes.)

Collegiate: A team of 12-20 skaters. Skaters must be enrolled in a degree program as a full time student. Teams in this division must be sponsored by a college or university that has at least an Associate Membership with the U.S.F.S. The team must use the college or university's name as part of their name. (Time 4:30 minutes.)

Open Collegiate: A team of 8-16 skaters. Skaters must be enrolled in a degree program at a college or university full or part time. (Time 2:30 minutes.)

Deadline is December 17, 2005

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Application Form

Team Name _____ # of skaters _____
Club Name _____
Coach(es) _____ Phone _____
Contact Person _____ Phone _____
Address _____
City/State/Zip _____
Hotel where team will be staying _____ Phone _____
Arrival Time _____

Division Entered:

____ Preliminary	____ Novice	____ Adult
____ Pre-Juvenile	____ Junior Short Program	____ Masters
____ Open Juvenile	____ Junior Free Skate	____ Open Adult
____ Juvenile	____ Open Junior	____ Collegiate
____ Intermediate	____ Senior Short Program	____ Open Collegiate
	____ Senior Free Skate	____ Beginner

Fee: \$85 per team/ per event plus \$20 per competitor/ per event (including alternates.)

OR

\$150 per team plus \$30 per competitor ~Jr./Sr. teams competing BOTH programs

All fees are payable in U.S. dollars only.

I have enclosed:

\$ _____ for _____ event(s) @ \$85 per team per event

\$ _____ for _____ Competitors @ \$20 per skater/ event

OR

\$ _____ for combined Jr./Sr. events @ \$150 per team

\$ _____ Total

~~~~~CERTIFICATION~~~~~

All skaters listed as members of the \_\_\_\_\_ Team, including Alternates, are to the best of my knowledge: in good standing with our club, are amateurs and are eligible to compete under the rules of the U.S.F.S.A.

Signature of Club Officer \_\_\_\_\_ Title \_\_\_\_\_

Print Name: \_\_\_\_\_ Club Name \_\_\_\_\_

**Mail to:**

JoAnn Eastman  
42545 White Hart Blvd.  
Canton, MI 48188

**Deadline is December 17, 2005**

# TRI - STATE SYNCHRONIZED TEAM SKATING CHAMPIONSHIPS

## Team Roster Form

Team Name: \_\_\_\_\_ Division \_\_\_\_\_

Club: \_\_\_\_\_

Coach(es): \_\_\_\_\_

Please type in alphabetical order by skaters' last name:

| Last Name/ First Name | Birthdate | Age* | USFSA# |
|-----------------------|-----------|------|--------|
| 1                     |           |      |        |
| 2                     |           |      |        |
| 3                     |           |      |        |
| 4                     |           |      |        |
| 5                     |           |      |        |
| 6                     |           |      |        |
| 7                     |           |      |        |
| 8                     |           |      |        |
| 9                     |           |      |        |
| 10                    |           |      |        |
| 11                    |           |      |        |
| 12                    |           |      |        |
| 13                    |           |      |        |
| 14                    |           |      |        |
| 15                    |           |      |        |
| 16                    |           |      |        |
| 17                    |           |      |        |
| 18                    |           |      |        |
| 19                    |           |      |        |
| 20                    |           |      |        |
| 21                    |           |      |        |
| 22                    |           |      |        |
| 23                    |           |      |        |
| 24                    |           |      |        |
| 25                    |           |      |        |
| 26                    |           |      |        |
| 27                    |           |      |        |
| 28                    |           |      |        |
| 29                    |           |      |        |
| 30                    |           |      |        |

\* Age as of the preceding July 1st

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CHAMPIONSHIPS**

Saturday, February 11, 2006

**Practice Ice Application**

Practice ice will be available on Friday, February 10, from 5:00 pm – 11:45 pm. Practice ice may also be available Saturday before the competition begins. Practice times will run in 15-minute segments on a first come – first served basis, at the rate of \$85 per segment on the competition surface. Segments will be scheduled as the requests arrive.

Please fill out a separate form for each team.

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

Division: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Hotel where team will be staying: \_\_\_\_\_ Phone: \_\_\_\_\_

Arrival time: \_\_\_\_\_

Please indicate the number of segments requested: \_\_\_\_\_

Please indicate time range preferred:

First choice: \_\_\_\_\_

Second choice \_\_\_\_\_

Third choice \_\_\_\_\_

Does this team have cross skaters? \_\_\_\_\_ If so, on what other teams? \_\_\_\_\_

I have enclosed \$ \_\_\_\_\_ for \_\_\_\_\_ segments.

Please make checks payable to **Dearborn Figure Skating Club** and mail it along with your completed Application Form, Team Roster Form, and Practice Ice Form to:

JoAnn Eastman  
42545 White Hart Blvd.  
Canton, MI 48188

**Deadline is December 17, 2005**

## Competition Program Photos

If you are submitting a photo for inclusion in the program, please list the team name, and all skaters from left to right by row and submit with the photo. Photo must be 5x7 size. Please make sure your photos are not too dark for copying.

Send photos and this form to: JoAnn Eastman 42545 White Hart Blvd.,  
Canton, MI 48188

**Team Name** \_\_\_\_\_

**Club represented** \_\_\_\_\_

**\$10.00 fee per photo enclosed      Total      \$** \_\_\_\_\_

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## Competition Pin Pre- Orders

If you would like to preorder competition pins, please fill out below and enclose with registration forms. Preorder prices reflect a discount.

**Team Name** \_\_\_\_\_

**Pins ordered @ \$5.00 each** \_\_\_\_\_

**Total enclosed      \$** \_\_\_\_\_

**Your pins will be included in your registration packet.**

**Deadline is December 17, 2005**