**Medal Test Application Form**
**To be sent to HOME CLUB**

Name: _____

T/C number: _____

Tel number: _____

Email: _____

Date of test: _____/_____/_____

| Test | Medal | NZISA Medal Fee |
|---|---|---|
| | | $30 |
| | | |
| | | |
| | | |
| | | |

Total Fees $_____

Cost of ice will be based on time spent on the ice.
The cost of the judges expenses will be equally shared amongst the skaters testing and will be invoiced to you after the test.

Forms & Fees to:

| | | |
|---|---|---|
| Competition Secretary | or | Club Mail Box |
| PO Box 2545 | | (On wall beside Club Room) |
| Dunedin 9044 | | |

**By the: Sunday 18th April 2010**

Cheques are payable to: Dunedin Ice Skating Club