

IJS Protocol for Test Credit Request Form

(For WWFSC Members Only)

Skater's Name:		USFS#:		
Address:		City, State, and	d Zip	
Phone:	Email: _			
Parent/Guardian or Adult S	Skater's Signature:			
Name of Competition:				
Date of Competition:				
protocol. I have seen the u	naltered and correnat altering a proto	ect scores, which match th pcol sheet to meet the tes	t requirement is considered an	
Coach's Name:				
Coach's Signature:		Date:		
Coach's Email:		Coach's Phone:		
Coach's USFS#:		Coach's PSA#:		
Select the test you are req	uesting credit for:	: (\$25 per test)		
Circulate Free	- Cluste Teste	Deine Teste	Damas Tasta	

Singles Free Skate Tests	Pairs Tests	Dance Tests
Juvenile	Juvenile	Juvenile
Intermediate	Intermediate	Intermediate
Novice	Novice	Novice
Junior	Junior	Junior
Senior	Senior	Senior
Adult Gold		

Please email this form as well as the following documents to test chair Joan Viviano at members@wwfsc.com:

- 1. The overall event results, which include the names and signatures of the Event Referee and Technical Controller
- 2. Your individual protocol
- 3. Your Test Credit Skater report from the competition

Please submit payment online through your EntryEeze member account under Merchandise at http://bit.ly/2jMJJ2n. All attachments must emailed. Incomplete requests will not be accepted. All communication is by email. All requests must be received by August 21 in ordered to be processed by September 1. LATE FORMS WILL NOT BE PROCESSED.