

Test and Competition Registration Form

For skaters wishing to compete in NZISA sanctioned championships or NZISA medal tests.

NZISA

NEW ZEALAND ICE SKATING ASSOCIATION, INC.

Enquiries: tcsecretary@nzisa.com

INSTRUCTIONS

- Please read the NZISA Privacy Policy, Constitution, and the Rules & Regulations on the NZISA website (<http://www.nzisa.com/rules/>).
- If you are registering for the first time please provide copies of official documents that establish your identity (name, date of birth, and citizenship/residency status). The NZISA reserves the right to request certified copies or to view the originals of these documents.
- Complete all sections of this form and update/correct any pre-printed information that is incorrect.
- You must be a member of a skating club affiliated to the NZISA before your registration can be processed.
- The registration fee is **\$50.00**. **Please make payment to your home Club.** Registration is valid until 31 March the following year.
- Sign and date the form. **Return the completed form together with payment to your Club Secretary.**

Skater's T.C. Registration Number
(NZISA/CLUB USE ONLY)

Fee Received

Year :

2008

1. Enter your personal details:

Title (*circle answer*)
 Legal First/given names
 Legal Family name/last name/surname
 Preferred First name
 Date of birth (adult skaters 25 and over enter "25+")
 Gender

Miss / Mrs / Ms / Mr / Dr / other	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Female	<input type="checkbox"/> Male

2. What is your citizenship/residency status in New Zealand?

- NZ Citizen (born in New Zealand or granted citizenship)
 NZ Permanent Resident – my country of citizenship is
 Other – my country of citizenship is

<input type="text"/>
<input type="text"/>

3. Contact Details (most correspondence will be by email. This should be a parent's email address for skaters under 18 years of age):

Street/P.O. Box Address
 Suburb/RD
 City
 Region/Province/State
 Daytime Phone
 Mobile
 Parent's E-mail Address
 Emergency Contact

<input type="text"/>		
<input type="text"/>		
<input type="text"/>	Postal Code	<input type="text"/>
<input type="text"/>	Country	<input type="text"/>
<input type="text"/>	Evening or A/H Phone	<input type="text"/>
<input type="text"/>	Fax	<input type="text"/>
<input type="text"/>	Phone	<input type="text"/>

4. Skating Information:

Test/Competition Class Standard Adult Recreational
 Home Skating Club
 Principal Coach
 Secondary Coach

<input type="text"/>	Choreographer	<input type="text"/>
<input type="text"/>		

5. Signatures: I/We agree to be bound to the NZISA Constitution, Code of Ethics, Policy, and the Rules and Regulations. See: <http://www.nzisa.com/rules/>

Skater/Parent
 Club Secretary

<input type="text"/>
<input type="text"/>

Date
 Date

<input type="text"/>
<input type="text"/>
\$

Amount Enclosed