



**2012 SKATE CANADA MANITOBA STARSKATE CHAMPIONSHIPS SINGLES EVENT REGISTRATION
MARCH 2ND – 4TH, 2012 – WINKLER, MB**

Name:	Home Phone:
Address:(Street, Box, City/Town, Prov./State, Postal/Zip code)	Email:
Age (as of Oct 1, 2011): Birthday: M D Y Gender: M ___ F ___ Please bring birth certificate to event	Parents Name:
Home Club:	Work Phone:
Club Number:	Skate Canada Number:
Region:	Highest Test Passed (as of November 15, 2011):
Club Test Chair Signature	Free Skate:
Coach Name:	Interpretive:
Address:	Skills:
Phone:	Coach Signature
Email:	Date
As a Professional Coach I acknowledge all the information presented and the event(s) entered are correct.	

Free Skate
<input type="checkbox"/> Gold <input type="checkbox"/> Senior Silver <input type="checkbox"/> Junior Silver <input type="checkbox"/> Senior Bronze <input type="checkbox"/> Junior Bronze 10 & under <input type="checkbox"/> Junior Bronze 11 & over <input type="checkbox"/> Preliminary 9 & under <input type="checkbox"/> Preliminary 10 & over <input type="checkbox"/> Pre-Preliminary 8 & under <input type="checkbox"/> Pre-Preliminary 9 & over

<u>Entry Fees</u>	
Pre-Preliminary & Preliminary	\$60.00 \$ _____
Junior Bronze & Up	\$70.00 \$ _____
Total Enclosed	\$ _____

It is understood and agreed that Skate Canada shall not be liable for injury or loss occasioned by the Athlete while traveling to or from or during the 2012 Skate Canada Manitoba STARSkate Championships, nor shall Skate Canada be responsible for any damages or losses caused by the athlete during the same time. The Athlete and/or Athlete's parent(s)/legal guardian agrees to indemnify Skate Canada and hold it harmless from any claims or demands in respect of such loss or damage.

Participant Signature _____ Parent Signature (if under the age of 18) _____ Date _____

The undersigned athlete or legal guardian hereby consents and grants the rights to Skate Canada Manitoba or authorized parties the use of performances, name, biography, likeness, videos and photos of you or your child. You hereby agree that Skate Canada is entitled to the exclusive and perpetual right to the copyright of these pictures and videos and that all right, title and interest in the pictures and videos, and all proceeds from the display, use, distribution or otherwise of same is the sole property of Skate Canada Manitoba.

Participant Signature _____ Parent Signature (if under the age of 18) _____ Date _____

Credit Card- ___ Visa ___ MC ___ AMEX CC# _____ Exp _____ Signature: _____

Name that appears on credit card _____

NO information will be mailed or emailed out for this competition. **ALL** information will be posted on the website. Make cheques payable to Skate Canada Manitoba. Return COMPLETE registration forms to Skate Canada Manitoba c/o STARSkate Championships 145 Pacific Ave Winnipeg, MB R3B 2Z6 Fax number: (204)925-5924 Registrations must be received by **JANUARY 31st, 2012**. Late or incomplete entries WILL NOT be accepted – Post dated cheques will not be accepted. NO REFUNDS after closing date of entries.



2012 Skate Canada Manitoba STARSkate Championships Pair Event Registration

March 2nd – 4th, 2012 Winkler, MB

FEMALE	Name:	MALE	Name:
Address:(Street, Box, City/Town, Prov./State, Postal/Zip Code)	Home Phone:	Address:(Street, box, City/Town, Prov./State, Postal/Zip Code)	Home Phone:
	Parents Name:		Parents Name:
	Work Phone:		Work Phone:
	Email:		Email:
Age (As of Oct 1, 2011): Birthday: M D Y Please bring birth certificate to event.	Skate Canada Number:	Age (As of Oct 1, 2011): Birthday: M D Y Please bring birth certificate to event.	Skate Canada Number:
Home Club: Club Number: Club Test Chair Signature	Highest Test Passed: (as of Nov 15, 2011) Pair:	Home Club: Club Number: Club Test Chair Signature	Highest Test Passed: (as of Nov 15, 2011) Pair:
Coach Name:		Phone:	
As a Professional Coach I Acknowledge all the information presented and the event(s) entered are correct.			
Coach Signature		Date	
<input type="checkbox"/> Open Pairs		Pairs Event	

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Participant Signature _____	Parent Signature (if under the age of 18) _____	Date _____	Competition Fees:	
Participant Signature _____	Parent Signature (if under the age of 18) _____	Date _____	\$70.00/couple	\$ _____
			Total	\$ _____

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Participant Signature _____	Parent Signature (if under the age of 18) _____	Date _____	Participant Signature _____	Parent Signature (if under age of 18) _____	Date _____
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Credit Card- ___Visa ___MC ___AMEX CC# _____ Exp _____ Name on Card: _____ Signature: _____

NO information will be mailed or emailed out for this competition. **ALL** information will be posted on the website.

Make cheques payable to Skate Canada Manitoba. Return COMPLETE registration forms to Skate Canada Manitoba c/o STARSkate Championships 145 Pacific Ave Winnipeg, MB R3B 2Z6 Fax number: (204)925-5924 Registrations must be received by **JANUARY 31st, 2012**. Late or incomplete entries WILL NOT be accepted – Post dated cheques will not be accepted. NO REFUNDS after closing date of entries.



2012 Skate Canada Manitoba STARSkate Championships Dance Event Registration

March 2nd – 4th, 2012 Winkler, MB

FEMALE	Name:	MALE	Name:
Address:(Street, box, City/Town, Prov./State, Postal/Zip Code)	Home Phone: Parents Name: Work Phone: Email:	Address:(Street, box, City/Town, Prov./State, Postal/Zip Code)	Home Phone: Parents Name: Work Phone: Email:
Age (As of Oct 1, 2011): Birthday: M D Y Please bring birth certificate to event.	Skate Canada number:	Age (As of Oct 1, 2011): Birthday: M D Y Please bring birth certificate to event.	Skate Canada Number:
Home Club: Club Number:	Highest Test Passed: (as of Nov 15, 2011) Dance:	Home Club: Club Number:	Highest Test Passed: (as of Nov 15, 2011) Dance:
Club Test Chair Signature		Club Test Chair Signature	
Coach Name:		Phone:	
As a Professional Coach I Acknowledge all the information presented and the event(s) entered are correct.			
Coach Signature		Date	

Dance Events

- Preliminary
- Junior Bronze
- Senior Bronze
- Junior Silver
- Senior Silver
- Gold

Competition Totals:

\$60.00 (Preliminary) \$70.00 (Junior Bronze & up) \$ _____
Total: \$ _____

Cheques are to be made payable to Skate Canada Manitoba

Credit Card- ___ Visa ___ MC ___ AMEX CC# _____ Exp _____ Signature: _____

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Participant Signature **Parent Signature (if under the age of 18)** **Date** **Participant Signature** **Parent Signature (if under age of 18)** **Date**

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Participant Signature **Parent Signature (if under the age of 18)** **Date** **Participant Signature** **Parent Signature (if under age of 18)** **Date**

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