

HIGH SCHOOL LETTERING PROGRAM APPLICATION

Skater _____ Date _____

Address _____ Age _____

School _____ Grade _____

A. Current Skating Levels: Coach(es) _____

Dance: _____

Freestyle: _____

Moves in the Field: _____

B. Current Year's Skating Practice History: (Days of week, length of sessions, attendance, etc.)

C. Current Year's Testing History: (include dates and tests attempted and result)

D. Current Year's Competition, Exhibition, Ice Show History:

E. MCFSC Volunteer Experience:

F. Recommendation of Coaches:
