

ARTISTIC ROLLER SPORTS COMMITTEE

Chairperson – Margaret Grant
Secretary – Yvonne Lambert-Smith
Email: artistic.secretary@gmail.co.nz



SENIOR WORLD CHAMPIONSHIPS 2018 FRANCE

Senior – 12 years of age and over as at 1 January 2018

NAME: _____

AGE: _____ DATE OF BIRTH: _____ E MAIL: _____

ADDRESS: _____

PHONE: _____ MOBILE: _____

Medal Tests Held: Figures _____ Freeskating _____ Dance Pairs _____

Solo Dance _____ Inline _____

I/We wish to be considered for nomination for the following positions:

SENIOR FIGURES LADIES/MENS _____ SENIOR FREESKATING LADIES/MENS _____

WORLD INLINE LADIES/MENS _____

SENIOR DANCE PAIRS _____ SENIOR SOLO DANCE LADIES/MENS _____

I agree and certify to the following:

1. I understand that I would be under the complete jurisdiction of the NZFRS and will abide by the rules/policies of the NZFRS, the NZ Artistic Sports Committee and appointed officials.
2. I will attend team training as required and understand that my training and attitudes will be assessed at each and any team training and that I may be removed from nomination, if standards are not maintained.
3. I agree to pay any deposit towards team training equalisation costs as and when required.
4. I will abide by all travel, accommodation and team uniform requirements made by team officials.
5. I will undergo at my own cost any physical fitness assessment as may be required by team management or the NZ Artistic Sports Committee.

SIGNED: _____ (SKATER) PARENT _____

DATE: _____

NOMINATION FEE: \$200

Applications should be accompanied by nomination fee and sent to the Secretary at artistic.secretary@gmail.com
Closing date: 20/03/18. The World team will be selected from the Central Areas on April 20th – 22nd in Palmerston North at Arena 3.



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JUNIOR WORLD CHAMPIONSHIPS 2018 FRANCE

Junior – 12 years of age and not yet 19 years of age as at 1 January 2018

NAME: _____

AGE: _____ DATE OF BIRTH: _____ E MAIL: _____

ADDRESS: _____

PHONE: _____ MOBILE _____

Medal Tests Held: Figures _____ Freeskating _____ Dance Pairs _____

Solo Dance _____

I/We wish to be considered for nomination for the following positions:

JUNIOR FIGURES LADIES/MENS _____

JUNIOR FREESKATING LADIES/MENS _____ JUNIOR SOLO DANCE LADIES/MENS _____

JUNIOR DANCE PAIRS _____

I agree and certify to the following:

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5. I will undergo at my own cost any physical fitness assessment as may be required by team management or the NZ Artistic Sports Committee.

SIGNED: _____ (SKATER) PARENT _____

DATE: _____

NOMINATION FEE: \$200

Applications should be accompanied by nomination fee and sent to the Secretary at artistic.secretary@gmail.com
Closing date: 20/03/2018. The World team will be selected from the Central Areas on April 20th – 22nd in Palmerston North at Arena 3.



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NOMINATION FORM PRECISION/SHOW TEAMS WORLD CHAMPIONSHIPS 2018 FRANCE.

Skaters must be 12 years of age as at 1 January 2018

Team Name: _____ **PRECISION / QUARTETS**
SHOW (small) / SHOW (large)

Team List

TEAM MEMBER (Please print clearly)		
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		

One Team list should be accompanied by an individual nomination form for each team member along with the \$200 nomination fee per skater in the team.

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NOMINATION FORM PRECISION/SHOW TEAMS WORLD CHAMPIONSHIPS 2018 FRANCE.

Skaters must be 12 years of age as at 1 January 2018

NAME: _____ TEAM NAME: _____

AGE: _____ DATE OF BIRTH: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

Medal Tests Held:

Figures _____ Freeskating _____ Dance Pairs _____ Solo Dance _____

Freeskating Pairs _____ Inline _____ Precision (Team) _____

Precision (Mini) _____

I wish to be considered for nomination for the following positions:

PRECISION _____ QUARTETS _____

SMALL SHOW GROUP _____ LARGE SHOW GROUP _____

I agree and certify to the following:

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SIGNED: _____ (SKATER) PARENT _____

DATE: _____

NOMINATION FEE: \$200

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