

**ARTISTIC ROLLER SPORTS COMMITTEE**

Chairperson – Yvonne Lambert-Smith  
Secretary – Janine Price  
Email: [artistic.secretary@gmail.com](mailto:artistic.secretary@gmail.com)



## NOMINATION FORM

### SENIOR ARTISTIC TEAM - OCEANIA CHAMPIONSHIPS 2022

Athletes aged 19 years & over in the year of competition, (unless previously competed at World Championships and under 19 years)

**NAME:** \_\_\_\_\_ **PARTNERS NAME** \_\_\_\_\_

**AGE:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**Medal Tests Held: Figures** \_\_\_\_\_ **Freeskating** \_\_\_\_\_ **Dance Pairs** \_\_\_\_\_

**Solo Dance** \_\_\_\_\_ **Freeskating Pairs** \_\_\_\_\_ **Inline Free** \_\_\_\_\_

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

SENIOR OCEANIA FIGURES \_\_\_\_\_ SENIOR OCEANIA FREE \_\_\_\_\_

SENIOR OCEANIA DANCE COUPLES \_\_\_\_\_ SENIOR OCEANIA SOLO DANCE \_\_\_\_\_

SENIOR OCEANIA PAIRS \_\_\_\_\_ OCEANIA INLINE FREESKATING \_\_\_\_\_

I agree and certify to the following:

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.

**SIGNED:** \_\_\_\_\_ (SKATER) **PARENT:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**NOMINATION FEE:** \$200

Nomination forms to be sent to the Artistic Secretary at [artistic.secretary@gmail.com](mailto:artistic.secretary@gmail.com)

The nomination fee must be paid to the Artistic Account before the closing date.

Closing date: 17 June 2022

The 2022 Oceania team will be selected from the 2022 New Zealand Artistic Championships.



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## NOMINATION FORM

### JUNIOR ARTISTIC TEAM - OCEANIA CHAMPIONSHIPS 2022

Athletes 17 & 18 years in the year of competition, (unless previously competed at World Championships and under 17 & 18 years)

**NAME:** \_\_\_\_\_ **PARTNERS NAME** \_\_\_\_\_

**AGE:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**Medal Tests Held: Figures** \_\_\_\_\_ **Freeskating** \_\_\_\_\_ **Dance Pairs** \_\_\_\_\_

**Solo Dance** \_\_\_\_\_ **Freeskating Pairs** \_\_\_\_\_

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

**JUNIOR OCEANIA FIGURES** \_\_\_\_\_ **JUNIOR OCEANIA FREE** \_\_\_\_\_

**JUNIOR OCEANIA DANCE COUPLES** \_\_\_\_\_ **JUNIOR OCEANIA SOLO DANCE** \_\_\_\_\_

**JUNIOR OCEANIA PAIRS** \_\_\_\_\_

I agree and certify to the following:

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.

**SIGNED:** \_\_\_\_\_ (SKATER)      **PARENT** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**NOMINATION FEE:**      **\$200**

Nomination forms to be sent to the Artistic Secretary at [artistic.secretary@gmail.com](mailto:artistic.secretary@gmail.com)

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## NOMINATION FORM

### YOUTH ARTISTIC TEAM - OCEANIA CHAMPIONSHIPS 2022

Athletes 16 years in the year of competition.

NAME: \_\_\_\_\_ PARTNERS NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Medal Tests Held: Figures \_\_\_\_\_ Freeskating \_\_\_\_\_ Dance Pairs \_\_\_\_\_

Solo Dance \_\_\_\_\_

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

YOUTH OCEANIA FIGURES \_\_\_\_\_ YOUTH OCEANIA FREE \_\_\_\_\_

YOUTH OCEANIA DANCE COUPLES \_\_\_\_\_ YOUTH OCEANIA SOLO DANCE \_\_\_\_\_

I agree and certify to the following:

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.

SIGNED: \_\_\_\_\_ (SKATER) PARENT: \_\_\_\_\_

DATE: \_\_\_\_\_

**NOMINATION FEE: \$200**

Nomination forms to be sent to the Artistic Secretary at [artistic.secretary@gmail.com](mailto:artistic.secretary@gmail.com)

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## NOMINATION FORM CADET ARTISTIC TEAM - OCEANIA CHAMPIONSHIPS 2022

Athletes 14 & 15 years in the year of competition.

NAME: \_\_\_\_\_ PARTNERS NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Medal Tests Held: Figures \_\_\_\_\_ Freeskating \_\_\_\_\_ Dance Pairs \_\_\_\_\_

Solo Dance \_\_\_\_\_

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

CADET OCEANIA FIGURES \_\_\_\_\_ CADET OCEANIA FREE \_\_\_\_\_

CADET OCEANIA DANCE COUPLES \_\_\_\_\_ CADET OCEANIA SOLO DANCE \_\_\_\_\_

I agree and certify to the following:

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.

SIGNED: \_\_\_\_\_ (SKATER) PARENT \_\_\_\_\_

DATE: \_\_\_\_\_

NOMINATION FEE: \$200

Nomination forms to be sent to the Artistic Secretary at [artistic.secretary@gmail.com](mailto:artistic.secretary@gmail.com)

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## NOMINATION FORM

### MASTERS ARTISTIC TEAM - OCEANIA CHAMPIONSHIPS 2022

Masters (Figs, SD, Dance Couples) : Athletes who are at least 30 years & over in the year of competition

Masters Free : Athletes who are 21 years old & over in the year of competition

**NAME:** \_\_\_\_\_ **PARTNERS NAME:** \_\_\_\_\_

**AGE:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**Medal Tests Held: Figures** \_\_\_\_\_ **Freeskating** \_\_\_\_\_

**Dance Pairs** \_\_\_\_\_ **Solo Dance** \_\_\_\_\_

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

MASTERS OCEANIA FIGURES \_\_\_\_\_ ADVANCED MASTERS OCEANIA FIGURES \_\_\_\_\_

MASTERS OCEANIA DANCE COUPLES \_\_\_\_\_ ADVANCED MASTERS OCEANIA DANCE COUPLES \_\_\_\_\_

MASTERS OCEANIA SOLO DANCE \_\_\_\_\_ ADVANCED MASTERS OCEANIA SOLO DANCE \_\_\_\_\_

MASTERS OCEANIA SOLO DANCE STYLE DANCE \_\_\_\_\_ MASTERS OCEANIA SOLO DANCE FREEDANCE \_\_\_\_\_

MASTERS OCEANIA FREESKATING \_\_\_\_\_

I agree and certify to the following:

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.

**SIGNED:** \_\_\_\_\_ (SKATER) **PARENT** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**NOMINATION FEE: \$200** Nomination forms to be sent to the Artistic Secretary at [artistic.secretary@gmail.com](mailto:artistic.secretary@gmail.com) The nomination fee must be paid to the Artistic Account before the closing date.  
**Closing date: 17 June 2022**

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## NOMINATION FORM

### PRECISION/SHOW TEAMS - OCEANIA CHAMPIONSHIPS 2022

Team Name: \_\_\_\_\_

**Team List**

TEAM MEMBER (Please print clearly)	NZFRS NO
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 nomination fee (\$200 per skater in the team).

Nomination forms to be sent to the Artistic Secretary at [artistic.secretary@gmail.com](mailto:artistic.secretary@gmail.com)

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## NOMINATION FORM

### PRECISION/SHOW TEAMS - OCEANIA CHAMPIONSHIPS 2022

NAME: \_\_\_\_\_ TEAM NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**Medal Tests Held:**

Figures \_\_\_\_\_ Freeskating \_\_\_\_\_ Dance Pairs \_\_\_\_\_

Solo Dance \_\_\_\_\_

Freeskating Pairs \_\_\_\_\_ Inline \_\_\_\_\_ Precision (Team) \_\_\_\_\_

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

SENIOR PRECISION \_\_\_\_\_ JUNIOR PRECISION \_\_\_\_\_

SMALL SHOW GROUP \_\_\_\_\_ LARGE SHOW GROUP \_\_\_\_\_

JUNIOR SHOW GROUP \_\_\_\_\_ CADET QUARTET \_\_\_\_\_

JUNIOR QUARTET \_\_\_\_\_ SENIOR QUARTET \_\_\_\_\_

I agree and certify to the following:

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SIGNED: \_\_\_\_\_ (SKATER) PARENT: \_\_\_\_\_

DATE: \_\_\_\_\_

**NOMINATION FEE: \$200**

Applications should be accompanied by nomination fee and sent through your Club Secretary to Nomination forms to be sent to the Artistic Secretary at [artistic.secretary@gmail.com](mailto:artistic.secretary@gmail.com)

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