



## **IJS SHEFFIELD**

**22<sup>nd</sup> TO 26<sup>th</sup> AUGUST 2016**

**CLOSING DATE 5PM ON 22<sup>nd</sup> July 2016**

## OFFICIAL ENTRY FORM

**PLEASE READ BEFORE COMPLETING THE ATTACHED ENTRY FORM**  
**CLOSING DATE FOR ENTRIES IS 22<sup>nd</sup> July 2016 AT 5PM. NO LATE ENTRIES WILL BE ACCEPTED**

Application for IJS events must be made to the NISA Office by the closing date for the event as stated on the entry form.

Note: A maximum of TWO coaches per competitor or pairs / dance team will be allocated accreditation which allows access to ice-level. Please indicate which coach(es) require accreditation if naming more than this number, or NISA will select.

A programme element sheet is required for all skaters entering the IJS events for all programmes. Please complete this (elements and timings) even if the elements and order are subject to change.

**Entries will not be accepted for IJS events without this, resulting in the application form being returned to the skater without it being registered for the event.**

**All skaters must hold the required entry standard and be a paid up NISA member AT CLOSING DATE. If Membership is out of date the entry form will be rejected.**

NISA will acknowledge receipt of a correctly and fully completed entry form by sending an e-mail to the skater giving a receipt of entry number. This number should be kept and used in any further correspondence with NISA regarding the entry to this event only. Skaters who do not receive a receipt number should query this BEFORE the closing date.

NISA reserves the right to eliminate entries to 18 competitors after individual segments should entries exceed 24 in any section due to ice time restraints.

### COMPETITION REQUIREMENTS

**All competitions will be run in accordance with ISU criteria for the 2016 /2017 season. Skaters and their coaches are strongly advised to read all the relevant communications which are available on the ISU website [www.isu.org](http://www.isu.org)**

### IJS ENTRY FEES 2016/17

Novice, Junior and Senior Single Skaters	£73*
Novice, Junior and Senior Dance per couple	£103*
Novice, Junior and Senior Pairs per couple	£103*

**\*Please note that entry fees are non-refundable**

Entries should be submitted by one of the following methods:

#### **MAIL TO**

NISA Events Administrator  
Grains Building  
High Cross Street  
Nottingham NG1 3AX

**FAX TO:** 0115 988 8061

**E MAIL To:** [entries@iceskating.org.uk](mailto:entries@iceskating.org.uk)

## **Official Practice**

In order to reduce the length of the event, practice sessions will not be held at this event.

## **ENTRY REQUIREMENTS to IJS EVENTS FOR SEASON 2016/2017**

Skaters must hold the following tests or their equivalency before the closing date for the event. In the case of competitive tests, skaters must have applied using the correct paperwork and paid the required fee for the competitive test before the closing date. Entries cannot be accepted test pending.

Standard and competitive tests may be mixed, as long as all are held, applied for and paid for before the closing date. For example, a Junior dance couple may hold a standard Level 9 Field Moves test, a Junior Competitive Short Dance test and a Standard Level 9 Free Dance test, giving entry to the Junior section. A singles skater may hold a Level 10 Field Moves test, a Senior Competitive Short test and a Standard Level 9 Free test and will be eligible for the Junior section of the event.

NISA reserve the right to invite guest skaters into events at their discretion.

## **COMPETITION CRITERIA**

All competition criteria are as per ISU Special Regulations & Technical Rules 2014 relating to the discipline for the season 2016 / 2017 and ISU Communications 1874,1884, 1932, 1937 and 1947 where applicable and all pertinent subsequent updates.

	<b>FIELD MOVES</b>	<b>COMP DANCE</b>	<b>FREE DANCE</b>	<b>ELEM</b>	<b>FREE</b>	<b>PAIRS TESTS</b>		<b>FIELD MOVES</b>	<b>SHORT DANCE</b>	<b>FREE DANCE</b>
Basic Novice Dance	Level 4	Level 4	Level 4							
Advance Novice Dance	Level 6	Level 6	Level 6				<b>OR</b>	Level 8	Novice	Novice
Junior Dance	Level 9	Level 9	Level 9				<b>OR</b>	Level 9	Junior	Junior
Senior Dance	Level 10	Level 10	Level 10				<b>OR</b>	Level 10	Senior	Senior
Basic Novice A Singles*	Level 4			Level 4	Level 4					
Basic Novice B Singles*	Level 6			Level 6	Level 6					
Advanced Novice Singles	Level 8			Level 8	Level 8					
Junior Singles	Level 9			Level 9	Level 9					
Senior Singles	Level 10			Level 10	Level 10					
Basic Novice Pairs	Level 4			Level 4	Level 4	Level 4**				
Advanced Novice Pairs	Level 6			Level 4	Level 4	Level 6**				
Junior Pairs	Level 9			Level 4	Level 4	Level 9**				
Senior Pairs	Level 10			Level 4	Level 4	Level 10**				

\* Criteria as per ISU Com. 1947 Basic Novice A & B with regard to maximum age but with the exception that no minimum ages apply in either category.

\*\* New Pairs Test Levels. For Equivalency Level 10 = Old level 6, Level 9 = Old level 5, Level 6 = Old Level 2, Level 4 = Old Level 1

National Ice Skating Association of UK Ltd, Grains Building, High Cross Street, Nottingham, NG1 3AX

Telephone: 01159 888060 Fax: 01159 888061 E-mail: [entries@iceskating.org.uk](mailto:entries@iceskating.org.uk)

Website: [www.iceskating.org.uk](http://www.iceskating.org.uk)

## OFFICIAL ENTRY FORM FOR August IJS Sheffield

22<sup>nd</sup> – 26<sup>th</sup> August 2016

**CLOSING DATE FOR ENTRIES IS 22<sup>th</sup> July 2016 AT 5PM. NO LATE ENTRIES WILL BE ACCEPTED**

		Please tick			Please tick
BASIC NOVICE A MEN SINGLES			BASIC NOVICE A LADIES SINGLES		
BASIC NOVICE B MEN SINGLES			BASIC NOVICE B LADIES SINGLES		
ADVANCED NOVICE MEN SINGLES			ADVANCED NOVICE LADIES SINGLES		
JUNIOR MEN SINGLES			JUNIOR LADIES SINGLES		
SENIOR MEN SINGLES			SENIOR LADIES SINGLES		
BASIC NOVICE PAIRS			BASIC NOVICE DANCE		
ADVANCED NOVICE PAIRS			ADVANCED NOVICE DANCE		
JUNIOR PAIRS			JUNIOR DANCE		
SENIOR PAIRS			SENIOR DANCE		
<b>DETAILS OF MAN</b>			<b>DETAILS OF LADY</b>		
Full Name:			Full Name:		
Current Mailing Address:			Current Mailing Address:		
Email address:			Email address:		
Information will be emailed unless this box is ticked <input type="checkbox"/>			Information will be emailed unless this box is ticked <input type="checkbox"/>		
Membership Number:		Date of Birth:	Membership Number:		Date of Birth:
Telephone: (Daytime)		Telephone: (Evening)	Telephone: (Daytime)		Telephone: (Evening)
Primary Licensed Coach Name & Membership Number		Accredited Licensed Coach Name & membership Number	Primary Licensed Coach Name & Membership Number		Accredited Licensed Coach Name & membership Number
FIELD MOVES SEMINAR ATTENDED BY COACH VENUE: DATE:			IJS SEMINAR ATTENDED BY COACH VENUE; DATE:		

**IMPORTANT: THIS MUST BE SIGNED BY EITHER SKATERS OR PARENT/GAURDIAN:**

I / We understand and accept that anti-doping testing may take place during this event. I / We will make ourselves available at the time and place advised, if selected.

**IMPORTANT IF UNDER 18 YEARS OF AGE:** I, the parent / guardian of the above skater/s, who is / are under 18 years of age, agree to give the NISA and the appointed officials working on its behalf, my permission to test the skater(s) entered in the above competition if so selected. (If more than one skater then the form must be signed by each skater's parent / guardian)

I have read and agree to abide by the rules of the event and to observe the rules and directions of the NISA of UK Ltd at all times. I confirm that I am in good health and have no medical condition that would impede my ability to compete or be detrimental to any other competitor's ability to compete or cause harm whatsoever to any person. I understand that I participate in NISA sanctioned National Events at my own risk and that no liability is accepted by the Organisers and or the Association for any death, injury, damage or loss sustained by me during this event except as may be proven to be caused by the negligence of the Association. I further confirm that should any loss, injury, death or damage resulting from a negligent act or omission on my part as a result of any false information provided by me to the Association and / or the Organisers, then I shall fully indemnify the Association for any loss suffered as a result.

I DECLARE THAT I AM AN ELIGIBLE/RETAINED ELIGIBLE SKATER (DELETE AS APPROPRIATE)

Signature of Parent:	Date:	Signature of Parent:	Date:
Signature of Skater:	Date:	Signature of Skater:	Date:

**PAYMENT DETAILS**

**Bacs transfer details:**

Bank: Bank of Scotland. Sort Code 12 – 24 – 81 Account No. 00690501  
Account Name; National Ice Skating Association (UK) Ltd ( abbreviated to N.I.S.A.)

**CHEQUE / DEBIT CARD / CREDIT CARD (PLEASE CIRCLE)**

**NAME**.....

**CARD NUMBER**..... **ISSUE**  
**NUMBER**.....

**SECURITY NUMBER (LAST 3 DIGITS ON BACK OF CARD)**.....

**START DATE**..... **EXPIRY**  
**DATE**.....

PLEASE NOTE THAT CREDIT/DEBIT CARD PAYMENTS ARE SUBJECT TO A £0.50 ADMINISTRATION CHARGE  
CHEQUES SHOULD BE MADE PAYABLE TO NISA UK LTD

**NB: IF ENTERING TWO EVENTS PLEASE COMPLETE TWO SEPERATE ENTRY FORMS AND PROGRAMME ELEMENT SHEETS**

DO NOT CONVERT EQUIVALENCIES FROM COMPETITIVE TESTS TO NATIONAL LEVELS, but if field move equivalency as at 1<sup>st</sup> January 2007 was gained from National tests rather than Competitive tests please ensure the National tests are also listed.

Singles: Please complete chart below listing Field Moves and Competitive tests if held. Otherwise complete Field Moves and National test passes.

DETAILS OF MAN			DETAILS OF LADY		
	Highest Level	Date Passed		Highest Level	Date Passed
Field Moves			Field Moves		
Competitive short or National Elements			Competitive short or National Elements		
Competitive Free or National Free			Competitive Free or National Free		

Dance: Please complete chart below listing Field/Dance Moves and Competitive tests if held. Otherwise complete Field/Dance Moves and National test passes.

DETAILS OF MAN			DETAILS OF LADY		
	Highest Level	Date Passed		Highest Level	Date Passed
Dance/Field Moves			Dance/Field Moves		
Competitive C.D or National C.D			Competitive C.D or National C.D		
Competitive O.D or National O.D			Competitive O.D or National O.D		
Competitive S.D.			Competitive S.D.		
Competitive F.D or National F.D			Competitive F.D or National F.D		

Pairs: Please complete chart below listing Field moves and Pair tests. Please also complete sections showing Singles tests passed.

DETAILS OF MAN			DETAILS OF LADY		
	Highest Level	Date Passed		Highest Level	Date Passed
Field Moves			Field Moves		
NISA National Pairs Tests			NISA National Pairs Tests		
Pair Competitive Short			Pair Competitive Short		
Pair Competitive Free			Pair Competitive Free		
Single Competitive Short or National Elements			Single Competitive Short or National Elements		
Single Competitive Free or National Free			Single Competitive Free or National Free		

## Coach Details

NISA licensed coaches wishing to enter skaters for these events must have attended the discipline specific IJS seminar at the Coaches Conference and a field moves seminar prior to the date of the competition.

If the coach named on the application form has not done so, the skater will be given the opportunity to name another coach or remove the coach's name from their entry.'

Coach 1		Coach 2	
Name	Membership Number	Name	Membership Number
Date / Venue Conference \ IJS seminar attended		Date / Venue Conference \ IJS seminar attended	
Date / Venue Field Moves seminar attended		Date / Venue Field Moves seminar attended	

## Music Information

**All music must be on CD with the skater's name, event and the length of the music (not the skating time) clearly indicated. Tapes will not be accepted.**

<b>MUSIC DETAILS</b> <i>(Please fill in carefully as this information is required for entry)</i>	
Short Programme / Dance Music Title:	Composer(s):
	Time: (Mins / Secs)
Free Programme/ Dance Music Title:	Composer(s):
	Time: (Mins / Secs)

**Interpretation details on Short Programme / Dance:** i.e. Tell us what piece of music you have chosen, where did the music come from, if it is from a soundtrack, where the section of music is taken from in relation to the soundtrack, and what you are interpreting on the ice, including background information regarding the piece of music selected.

**Interpretation details on the Free Programme / Dance:** i.e. Tell us what piece of music you have selected, where it came from, if it is a soundtrack, where the section of music is taken from in relation to the soundtrack, and what you are interpreting on the ice, including background information regarding the piece of music selected.



# Programme Content Sheet

August IJS	Please complete in type or write in capital letters. Please only use ISU element codes. For Pairs and Dance only one partner need fill in this form.
Ice Sheffield 22 <sup>nd</sup> – 26 <sup>th</sup> August 2016	

Rink / Club:

Event:

Competitor(s)

## ELEMENTS IN ORDER OF SKATING

	Time*	Elements SP / SD		Time*	Elements FS / FD
1			1		
			2		
2			3		
			4		
3			5		
			6		
4			7		
			8		
5			9		
			10		
6			11		
			12		
7			13		
			14		
8			15		
			16		

\*Time during program

**Signature:**

**Date:**

## ANTI-DOPING

### PARENT/GUARDIAN CONSENT FORM FOR SKATERS UNDER THE AGE OF 18

Please read the following very carefully

#### Eligibility of Skaters for Anti-Doping Tests

It is the Association's policy that no skater under the age of 18 years at the time of anti-doping may be tested without written parental or guardian consent except those skaters under 18 who are currently members of, or who have been members of NISA Team Skate GB. It is a condition of eligibility for Squad membership that skaters under 18 years of age provide written parental or guardian consent to anti-doping testing both in and out-of-competition. For all skaters over 18 years of age, it is a condition of entry to all events and competitions sanctioned by NISA permit, that they are willing to participate in anti-doping testing at that event.

#### Anti-Doping Testing Programme - NISA Policy

The Association has determined that anti-doping testing may be carried out at any of the following:

- Competition Testing: International events held in the UK  
UK Championships  
Regional Championships (England/Scotland/Wales/N Ireland)  
National Competitions
- Squad Testing: Team Skate GB Out-of-Comp Testing: Team Skate GB (Including camps)
- Disciplines: Figure, Dance, Synchronized, Short Track Speed
- Genders: Male/Female
- Age: Not under 18 without written parental/guardian consent except current/past members of Team Skate GB who may be tested.

I have read, understand and agree to the above conditions.

Signed.....Parent/Guardian      Date .....

## PHOTOGRAPHY and VIDEOING CONSENT FORM

### IMPORTANT

- By entering the event, there is an acceptance that the child/participant may be videoed and photographed, unless the photography consent form states otherwise, and images may be published in any media selected by the National Ice Skating Association. NB All competitors will be videoed as part of the IJS Judging process.

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

**EVENT:**      IJS SHEFFIELD 2016

- I **DO** consent to the taking of photographs by the NISA Official Photographer at the event named above
- I **DO NOT** consent to the taking of photographs by the NISA Official Photographer at the event named above


Signed (Parent/Guardian):

Date:

.....

.....

**National Ice Skating Association of UK**  
**Media Information: Skaters Biographies**

DETAILS OF MAN	DETAILS OF LADY
Name:	Name:
Event:	Event:
Country of Birth:	Country of Birth:
Citizenship:	Citizenship:
Date of Birth:	Date of Birth:
Height & Weight (M / KG):	Height & Weight (M / KG):
Occupation:	Occupation:
First started skating: (age)	First started skating: (age)
Home Club / Rink:	Home Club / Rink:
Hobbies and Interests:	Hobbies and Interests:
Training programme in hours: (on ice / off ice)	Training programme in hours: (on ice / off ice)
Music Short / OD Programme:	Music Short / OD Programme:
Music Free / FD Programme:	Music Free / FD Programme:

Name of local newspaper: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_ FaxNumber: \_\_\_\_\_  
 Address: \_\_\_\_\_

Please post to: National Ice Skating Association of UK  
Grains Building  
High Cross Street  
Nottingham  
NG1 3AX

Or,

Fax: 0115 9888061

E Mail: [entries@iceskating.org.uk](mailto:entries@iceskating.org.uk)

**CLOSING DATE 5PM ON 22<sup>nd</sup> July 2016**

**PLEASE NOTE: INCOMPLETE ENTRY FORMS WILL BE RETURNED AND THE WHOLE ENTRY FORM WILL BE REJECTED WITHOUT THE SKATER BEING REGISTERED FOR THE EVENT.**