



HAWAII FIGURE SKATING CLUB



SKATE ALOHA 2010

PROGRAM ADVERTISEMENT ORDER FORM

Name: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Personal ads and patron contributions are a great way to wish your friends "Good Luck" and to show your support of the skaters and the competition, and to advertise your business.

Please check the box below for the size of your advertisement:

<input type="checkbox"/>	Back Cover**	\$ 100	7" W x 9 1/2" H
<input type="checkbox"/>	Inside Front Cover**	\$ 90	7" W x 9 1/2" H
<input type="checkbox"/>	Inside Back Cover**	\$ 70	7" W x 9 1/2" H
<input type="checkbox"/>	Full Page	\$ 60	7" W x 9 1/2" H
<input type="checkbox"/>	Three Quarter Page	\$ 55	7" W x 7" H
<input type="checkbox"/>	Half Page	\$ 30	7" W x 4 1/2" H
<input type="checkbox"/>	Quarter Page	\$ 15	3 1/2" W x 4 1/2" H

** Email Erin Stevens before selling one of these to ensure that it is still available.

For the above, please include a camera-ready copy of your advertisement. An additional charge of \$10.00 will be made for copy that is not camera-ready. We will be able to create an advertisement for you if you tell us what you want to say on a separate sheet of paper.

Your business card is a great way to advertise your business and support an excellent group of young people. The business card ad is the size of a normal business card. If you would like your business card included in our program, simply enclose your card. **STAPLING YOUR CARD TO THIS FORM MAY RESULT IN A HOLE OR A MARK ON YOUR BUSINESS CARD!!**

<input type="checkbox"/>	Business Card Ad	\$ 13	
<input type="checkbox"/>	"Wishes" Ad	\$ 10	Please attach completed form; "wishes ad's"

If you would like to Pre-order a program \$6 dollars pre order price and \$7 at the competition.

2009 Skate Aloha Program Pre-Order \$ 6











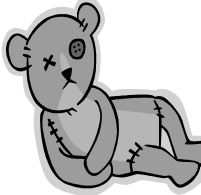
Mail to: Erin Stevens
44-176 Nanamoana Street
Kaneohe, HI 96744
estevenshawaii@gmail.com

Make check payable to: HFSC-Skate Aloha

Ad fee	\$ _____
Not-camera-ready fee	\$ _____
Pre-Order Program	\$ _____
Total Submitted	\$ _____

HAWAII FIGURE SKATING CLUB

WISHES AD'S

	<p>_____</p> <p>“The Difference Between Ordinary And Extraordinary, Is That Little Extra.”</p> <p>Love: _____</p>	<p>1</p>	<p>2</p>		<p>Here is to you _____ for all your achievements! Going beyond and continuing to grow!!</p> <p>Love: _____</p>	
<p>_____</p> <p><i>Way to go!!!</i></p> <p><i>Steadfast & Strong!!!</i></p> <p>Love: _____</p>		<p>3</p>	<p>4</p>	<p>_____,</p> <p>"Some people dream of success...while others wake up and work hard at it."</p> <p>Love: _____</p>		
	<p>DARE TO SOAR</p> <p>DARE TO DREAM</p> <p>DARE TO BE YOU!!</p>	<p>5</p>	<p>6</p>		<p>_____</p> <p>Be proud of you own reflection! You have plenty of determination mixed with the right amount of motivation!</p> <p>_____</p>	
	<p>_____</p> <p><i>It's not what you accomplish it's what you overcome!</i></p> <p>Love: _____</p>		<p>7</p>	<p>8</p>	<p>_____ “Most of the shadows of life are caused by standing in one’s own sunshine.”</p> <p>Love: _____</p>	
<p>_____</p> <p>_____</p> <p>_____</p>		<p>9</p>	<p>10</p>		<p>_____</p> <p>_____</p> <p>_____</p>	

<p>Wishes Ad Number to Purchase.</p> <p>_____</p>
<p>To Name: _____</p>
<p>From Name: _____</p>
<p>Message – (50 Characters max) _____</p>
<p>_____</p>



FORM B

SKATE ALOHA 2010

COMPETITORS DINNER

Hawaii FSC is sponsoring an Aloha Dinner for all Skate Aloha 2010 competitors, and their families, coaches, and friends.

The Aloha Dinner is held each year so that all competitors can meet before the competition. For those of you who have a skating pen pal, you may meet him/her at that time.

The dinner, held in the mezzanine of Ice Palace, is buffet style. For those who are skating on the final practice session, you will be able to eat after the sessions are done.

Date: Wednesday, March 10, 2010
 Time: 5:30 P.M. to 7:30 P.M.
 Place: Ice Palace Skating Arena - Mezzanine
 4510 Salt Lake Blvd
 Honolulu, HI 96818
 Cost: \$10.00 per person (Children 5 and under free)

Please print this page, fill out the bottom portion, and return it with your payment (checks made to HFSC - Skate Aloha) by **March 1, 2010**. You will not receive tickets for the dinner, but will need to check in at the registration table upon arrival. If you have any questions, call Lisa at (808) 479-7075 (or email frobabysumu@hawaii.rr.com).

You may submit this form together with the competition entry form.

----- CUT HERE -----

Skate Aloha Competitors Dinner Reply

Skater's Name: _____
(Enter your name if signing up separately from a skater.)

# of Persons Attending:		at \$ 10.00	
# of Children 5 and under:		at \$ 0.00	Free
TOTAL ENCLOSED:			

Mail to: Skate Aloha Dinner
92-1248 Umena Street
Kapolei, HI 96707

(Make checks payable to HFSC - Skate Aloha. FACE AMOUNT MUST BE IN U.S. DOLLARS.)

SKATE ALOHA 2010 PRACTICE ICE INFORMATION

Practice Ice will be available on March 10 and on each day of the competition. Skaters competing on a given day will be given priority if they prepay as indicated on the Practice Ice Request Form. You may also check the web site <http://www.hawaiifsc.org> . Email notifications will be sent to your email address that has been provided on your entry form. All scheduled practice sessions are subject to change or cancellation, depending on demand for ice.

Program music will be played on Wednesday, Thursday and Friday practice ice. Music will begin after a five-minute warm-up. Because of time constraints, program music will not be played during practice ice on the Saturday and Sunday of competition. Practice ice positions will be held for five minutes, after which they will be released to standby skaters.

Practice Ice Fees	Amount
Pre Paid Sessions –on or before 1/31/2010	\$10.00
Sessions 2/01/2010 and Walk ON's	\$12.00

No refunds for no shows.

Reservations for all practice ice must be made in advance. This practice ice request form must be filled in and mailed to the Practice Ice Chairperson. **DO NOT mail with your entry form!** All requests must be accompanied by a check or money order payable to: **HFSC-Skate Aloha.** There will be a \$25.00 charge for returned checks.

No practice ice will be reserved without payment and reservations will not be taken by phone.

If the requested practice ice cannot be confirmed, money will be refunded at registration. Rescheduled and canceled requests will be accepted up until one week after competition schedule is posted on HFSC web site. There will NOT be refunds for no-shows.

Practice Ice Request forms must be received by January 31, 2010.

Send to:

Desi Duarte
98-785 Kaonohi St. Apt. C
Aiea, HI. 96701-2436

We will confirm practice ice by mail **only** if you enclose a self-addressed, stamped envelope. To check on your reserved ice times, you may check the HFSC web site at: www.hawaiifsc.org or send email to sk8dad@hawaii.rr.com .

Young/Adult practice ice as follows:

- Pre-Bronze - on any session that includes Pre-Preliminary
- Bronze - on any session that includes Preliminary
- Silver - on any session that includes Juvenile
- Gold - on any session that includes Intermediate



SKATE ALOHA 2010 PRACTICE ICE REQUEST FORM

FORM C

Please check the requested ice time.

Requested	Time	Authorized Levels	Requested	Time	Authorized Levels
Wednesday March 10, 2010			Friday March 12, 2010		
	5:45 – 6:30 am	Preliminary – Senior		5:45 – 6:30 am	Preliminary – Senior
	6:30 – 7:15 am	Pre-Pre – Intermediate		6:30 – 7:15 am	Pre-Pre – Senior
	7:15 – 8:00 am	Menehune – Preliminary		7:15 – 8:00 am	Menehune – Intermediate
	8:00 – 8:45 am	Pre Juv – Senior		8:00 – 8:45 am	Menehune – Senior
	2:30 – 3:15 pm	Pre Juv – Senior			
	3:15 – 4:00 pm	Menehune – Preliminary	Saturday March 13, 2010		
	4:00 – 4:45 pm	Preliminary – Senior	*No music to be played. Early morning time.		
	4:45 – 5:00 pm	Ice Cut		½ hr TBD am	Anuenue – Pre Juv.
	5:00 – 5:45 pm	Menehune – Preliminary		½ hr TBD am	Juvenile – Senior
	5:45 – 6:30 pm	Menehune – Pre Pre			
Thursday March 11, 2010			Saturday March 13, 2010		
	5:45 – 6:30 am	Preliminary – Senior	*No music to be played. Early morning time.		
	6:30 – 7:15 am	Pre Juv – Senior		½ hr TBD am	Juvenile – Senior
	7:15 – 8:00 am	Menehune – Pre Juv		½ hr TBD am	Anuenue – Pre Juv.
	8:00 – 8:45 am	Menehune – Intermediate			

Total number of sessions requested: _____ X \$10.00 (after 1/31/2010 \$12.00) = \$ _____

Skater's Name: _____ Age: _____

Skater's/Guardian's email address (REQUIRED): _____

Parent/Guardian Name _____

Street: _____ Phone: _____

City: _____ State: _____ Zip: _____

Competition Level entered: _____

Events Entered: _____

Coaches Name: _____ Coach's email address _____

Send to:
Desi Duarte
98-785 Kaonohi St. Apt. C
Aiea, HI. 96701-2436

Young Adult and Adult practice ice as follows:
 Pre-Bronze - on any session that includes Pre-Preliminary
 Bronze - on any session that includes Preliminary
 Silver - on any session that includes Juvenile
 Gold - on any session that includes Intermediate



SKATE ALOHA 2010 ENTRY FORM

FORM D

Sex: _____ Birth date: _____
 Address: _____
 City: _____ State: _____ Country: _____ Zip: _____
 Mobile #: _____ Work #: _____ US Figure Skating # _____
 Home Club: _____ ISI # _____
 Please indicate Level and date of last test passed:
 US Figure Skating/Skate Canada _____ ISI _____

Event	1 st Event Entry Fee	Additional Event Entry Fee
Menehunes, Keiki & Anuenue	\$45.00	\$25.00 each
Pre-Preliminary, Preliminary, Pre-Juvenile, Juvenile, Open Juvenile, Intermediate, Novice, Junior, Senior, Young Adult Pre-Bronze, Adult Pre-Bronze, Young Adult Bronze, Adult Bronze, Young Adult Silver, Adult Silver, Young Adult Gold & Adult Gold	\$70.00	\$25.00 each

Please make checks payable to HFSC-Skate Aloha.
 All returned check will result in \$25.00 fee.
 All entries received after 1/31/2010 will need to include \$25.00 late fee.

1st Event: \$ _____
 Additional Events @ \$25.00 x _____ \$ _____
 Late Fee if Applicable: \$ _____
Total: \$ _____

Please submit payment in US Dollars.

1. How long have you been skating?	_____
2. Where is the most exciting place that you have ever competed?	_____
3. What is your favorite jump?	_____
4. What is your favorite spin?	_____
5. What is your favorite event?	_____
6. What do you do outside of skating?	_____
7. What does skating mean to you?	_____
8. Are you a senior in High School? Are you graduating this year?	_____

Please include a picture wallet size of yourself information to be used in program at competition.

Do you think that you will buy a competition T-shirt? _____
 What size would you need? _____
 The T-Shirt order forms will be emailed to you to complete. There will be limited t-shirt quantities at the competition, all sizes will vary.

 Attach a photo of yourself here or draw a picture in the space provided.

Pages 2, 3 and 4 must accompany Page 1 for complete entry.
 Otherwise Entry is NOT acceptable.

**SKATE ALOHA 2010
ENTRY FORM
EVENT SELECTION
PAGE 2**

Skater's Name: _____

COMPULSORY MOVES		SPIN EVENT		ARTISTIC		SHORT PROGRAM	
<input type="checkbox"/>	Menehune	<input type="checkbox"/>	Pre-Preliminary	<input type="checkbox"/>	Anuenu	<input type="checkbox"/>	Intermediate
<input type="checkbox"/>	Keiki	<input type="checkbox"/>	Preliminary	<input type="checkbox"/>	Pre-Preliminary	<input type="checkbox"/>	Novice
<input type="checkbox"/>	Anuenu	<input type="checkbox"/>	Pre-Juvenile	<input type="checkbox"/>	Preliminary	<input type="checkbox"/>	Junior
<input type="checkbox"/>	Pre-Preliminary	<input type="checkbox"/>	Juvenile	<input type="checkbox"/>	Pre-Juvenile	<input type="checkbox"/>	Senior
<input type="checkbox"/>	Preliminary	<input type="checkbox"/>	Open Juvenile	<input type="checkbox"/>	Juvenile		
<input type="checkbox"/>	Pre-Juvenile	<input type="checkbox"/>	Intermediate	<input type="checkbox"/>	Open Juvenile		
<input type="checkbox"/>	Juvenile	<input type="checkbox"/>	Novice	<input type="checkbox"/>	Intermediate		
<input type="checkbox"/>	Open Juvenile	<input type="checkbox"/>	Junior	<input type="checkbox"/>	Novice		
<input type="checkbox"/>	Young Adult Pre-Bronze	<input type="checkbox"/>	Senior	<input type="checkbox"/>	Junior		
<input type="checkbox"/>	Adult Pre-Bronze	<input type="checkbox"/>	Young Adult Pre-Bronze	<input type="checkbox"/>	Senior		
<input type="checkbox"/>	Young Adult Bronze	<input type="checkbox"/>	Adult Pre-Bronze	<input type="checkbox"/>	Young Adult Pre-Bronze		
<input type="checkbox"/>	Adult Bronze	<input type="checkbox"/>	Young Adult Bronze	<input type="checkbox"/>	Adult Pre-Bronze		
<input type="checkbox"/>	Young Adult Silver	<input type="checkbox"/>	Adult Bronze	<input type="checkbox"/>	Young Adult Bronze		
<input type="checkbox"/>	Adult Silver	<input type="checkbox"/>	Young Adult Silver	<input type="checkbox"/>	Adult Bronze		
<input type="checkbox"/>	Young Adult Gold	<input type="checkbox"/>	Adult Silver	<input type="checkbox"/>	Young Adult Silver		
<input type="checkbox"/>	Adult Gold	<input type="checkbox"/>	Young Adult Gold	<input type="checkbox"/>	Adult Silver		
		<input type="checkbox"/>	Adult Gold	<input type="checkbox"/>	Young Adult Gold		
				<input type="checkbox"/>	Adult Gold		
FREE SKATE		SHOWCASE		INTERPRETIVE			
<input type="checkbox"/>	Keiki	<input type="checkbox"/>	Menehune	<input type="checkbox"/>	Menehune		
<input type="checkbox"/>	Anuenu	<input type="checkbox"/>	Keiki	<input type="checkbox"/>	Keiki		
<input type="checkbox"/>	Pre-Preliminary	<input type="checkbox"/>	Anuenu	<input type="checkbox"/>	Anuenu		
<input type="checkbox"/>	Pre-Preliminary (Restricted)	<input type="checkbox"/>	Pre-Preliminary	<input type="checkbox"/>	Pre-Preliminary		
<input type="checkbox"/>	Preliminary	<input type="checkbox"/>	Preliminary	<input type="checkbox"/>	Preliminary		
<input type="checkbox"/>	Pre-Juvenile	<input type="checkbox"/>	Pre-Juvenile	<input type="checkbox"/>	Pre-Juvenile		
<input type="checkbox"/>	Juvenile	<input type="checkbox"/>	Juvenile	<input type="checkbox"/>	Juvenile		
<input type="checkbox"/>	Open Juvenile	<input type="checkbox"/>	Open Juvenile	<input type="checkbox"/>	Open Juvenile		
<input type="checkbox"/>	Intermediate	<input type="checkbox"/>	Intermediate	<input type="checkbox"/>	Intermediate		
<input type="checkbox"/>	Novice	<input type="checkbox"/>	Novice	<input type="checkbox"/>	Novice		
<input type="checkbox"/>	Junior	<input type="checkbox"/>	Junior	<input type="checkbox"/>	Junior		
<input type="checkbox"/>	Senior	<input type="checkbox"/>	Senior	<input type="checkbox"/>	Senior		
<input type="checkbox"/>	Young Adult Pre-Bronze	<input type="checkbox"/>	Young Adult Pre-Bronze	<input type="checkbox"/>	Young Adult Pre-Bronze		
<input type="checkbox"/>	Adult Pre-Bronze	<input type="checkbox"/>	Adult Pre-Bronze	<input type="checkbox"/>	Adult Pre-Bronze		
<input type="checkbox"/>	Young Adult Bronze	<input type="checkbox"/>	Young Adult Bronze	<input type="checkbox"/>	Young Adult Bronze		
<input type="checkbox"/>	Adult Bronze	<input type="checkbox"/>	Adult Bronze	<input type="checkbox"/>	Adult Bronze		
<input type="checkbox"/>	Young Adult Silver	<input type="checkbox"/>	Young Adult Silver	<input type="checkbox"/>	Young Adult Silver		
<input type="checkbox"/>	Adult Silver	<input type="checkbox"/>	Adult Silver	<input type="checkbox"/>	Adult Silver		
<input type="checkbox"/>	Young Adult Gold	<input type="checkbox"/>	Young Adult Gold	<input type="checkbox"/>	Young Adult Gold		
<input type="checkbox"/>	Adult Gold	<input type="checkbox"/>	Adult Gold	<input type="checkbox"/>	Adult Gold		

COACH'S CERTIFICATION

I have read this entry form and certify that it is complete, that the highest ISI test passed and the highest US Figure Skating/Skate Canada test passed is correct, and that the skater is eligible to enter the above listed events:

Coach's Signature _____

Member # _____

Phone # _____

Print Name: _____

Email Address: _____

Will you be attending the competition? Yes _____ No _____

Pages 1, 3 and 4 must accompany Page 2 for complete entry.

Otherwise Entry is NOT acceptable.

**SKATE ALOHA 2010
ENTRY FORM
CERTIFICATION
PAGE 3**

COMPETITOR / PARENT / GUARDIAN STATEMENT

I understand that this entry must be in the hands of the committee by January 31, 2010. The competition committee reserves the right to limit the number of entries accepted or to cancel an event due to time constraints. The undersigned agrees to hold harmless the U.S. Figure Skating Association, the Hawaii Figure Skating Club, the Ice Palace, and all employees, volunteers and agents from any loss, damage, and/or injury that may be sustained by the entrant in any manner while participating in any of the activities of said competition. I also agree that this application contains correct information to the best of my knowledge and that I will accept a collect phone call if the application is incomplete (if such information is necessary to comply with the rules and regulations of the US Figure Skating and competition committee). I understand that it may be necessary to schedule some competition events during school hours.

Signature of Entrant	Signature of Parent if Entrant is under 18	Date
Please Print Parent's Name		

**U. S. Figure Skating/Skate Canada
CLUB CERTIFICATION**

I hereby approve this entry for _____ for the 2010 Skate Aloha and I certify that she/he is a member of our club, is in good standing with the club and the US Figure Skating/Skate Canada (for amateur standing), and that the highest U. S. Figure Skating/Skate Canada test(s) passed are correct as listed.

Club Official/Club Test Chair	Title of Club Official	Date
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Club certification is not required for Menehune, Keiki or Anuenue events if not a member of U. S. Figure Skating or Skate Canada.

**SKATE ALOHA 2010
ENTRY FORM
CERTIFICATION**

PAGE 4

This form must be completed for all minor competitors Form is optional for adult skaters however it's recommended.

Attach the completed form to the competitor's entry form and mail to the Registrar with the entry form. This form may also be hand delivered to the Registrar during the registration prior to the start of practice ice.

Name of Competitor U.S. Figure Skating # / Skate Canada # / ISI #

In case of emergency, I hereby authorize medical treatment for my child, as named above, while attending the SKATE ALOHA figure skating competition.

Parent or Guardian Signature Print Parent Name Date

EMERGENCY NOTIFICATION INSTRUCTIONS:

Person to contact: _____ Relationship: _____

Day Phone Number (_____) _____ Night Phone Number (_____) _____

DRUG ALLERGIES AND SENSITIVITIES:

List drug allergies and sensitivities. If you have no allergies or sensitivities, write "NONE".

MEDICAL CONDITIONS AND SPECIAL INSTRUCTIONS:

List any existing medical condition or special needs for care. If you have none, please write "NONE".

PHYSICIAN AND INSURANCE INFORMATION:

Physician's Name: _____ Physician's Office # _____
Physician's Emergency # _____
Medical Insurance _____ Policy # _____

Pages 1, 2 and 3 must accompany Page 4 for complete entry.
Otherwise Entry is NOT acceptable.