

LAKESIDE'S 2ND ANNUAL

Open

COMPETITION

Sunday,
February 26, 2017
10am-12pm



LAKESIDE OPEN COMPETITION

ENTRY FORM

EVENTS FOR AGES 4 & Up

TOT 1-4

Solo Program
Solo Compulsories

PRE-ALPHA TO DELTA

Solo Program
Solo Compulsories
Stroking

FREESTYLE 1 AND UP

Solo Program
Solo Compulsories
Open Freestyle
Ensemble
Spotlight
Jump and Spin
Artistic Freestyle

Entry forms must be submitted by January 26, 2017.
Late applications will be charged a late registration fee of \$15.

Endorsed by the Ice Skating Institute (ISI)



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No credits or refunds.

Lakeside Brooklyn reserves the right to limit the number of entries and eliminate events.

Entry forms must be completed in entirety and signed by a coach. Fees must be paid by cash or credit card. Please submit payment and forms via e-mail, fax, or in person to:

E-mail: skate@lakesidebrooklyn.com
Fax: (347) 402-1960

Covered Rink is semi-enclosed (no sides) and measures 85 feet by 185 feet

Schedules will be e-mailed and posted to our website at www.lakesidebrooklyn.com one week before the competition.

Music must be submitted via e-mail in the form of an MP3 by February 13th. Please bring a copy of your music and sign in at least 45 minutes prior to warm-up time.

Judges must all be current ISI Professional Members with updated Judging Certifications. Coaches with participating skaters MUST judge at least one event per skater.

Warm-ups last 3-5 minutes and will be provided to each skater prior to his/her event.

Individual Awards will be issued to all competitors (1st-6th place) and presented during awards ceremonies.

Team Awards will be awarded to the top three teams, and team points will be awarded for all events as follows:

- 1st Place: 6 points
- 2nd Place: 5 points
- 3rd Place: 4 points
- 4th Place: 3 points
- 5th Place: 2 points
- 6th Place: 1 point

Eligibility Rules for Participants

1. Competitors must be current Individual or Professional ISI members up to and including the date of the competition. Non-members must include an additional \$15 in registration fees.
2. Skaters must compete at their highest test level passed, and all tests must be registered with the ISI National Office at least 30 days prior to the competition date.
3. Skaters in Pre-Alpha through Delta may not compete in events offered only to Freestyle 1 or above.
4. This competition will follow all rules and guidelines contained in the new edition of the ISI Handbook along with all 2016 Rule Revisions.
5. Skaters are to uphold high ethical standards and compete at their true ability.

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Members of USFS who are also Individual/Professional members registered with ISI may compete in accordance with the USFS/ISI Joint Statement of Policy. USFS skaters must check with their home club to determine if they need written permission to compete. USFS skaters must base his/her ISI skating level on the USFS test level as indicated below and in the ISI Competitor's Handbook. The ISI test level in which the USFS skater wishes to compete in MUST be registered with ISI as the highest level passed.

USFS skater who has passed:	May compete no lower than ISI:
Pre-Preliminary Freestyle	Freestyle 3/Open Bronze
Preliminary Freestyle	Freestyle 4/Open Silver
Pre-Juvenile Freestyle	Freestyle 4/Open Silver
Juvenile Freestyle	Freestyle 6/Open Gold
Intermediate Freestyle	Freestyle 6/Open Gold
Novice Freestyle	Freestyle 8/Open Platinum
Junior Freestyle	Freestyle 8/Open Platinum
Senior Freestyle	Freestyle 8/Open Platinum
Adult Pre-Bronze Freestyle	Freestyle 2/Open Bronze
Adult Bronze Freestyle	Freestyle 3/Open Bronze
Adult Silver Freestyle	Freestyle 4/Open Silver

Solo Programs

Solo program level requirements will follow the guidelines specified in the ISI Handbook 2016 Edition.

Solo Compulsories (half-ice for Freestyle 5 and below, no music)

All Tot Competitors must be under 7 years of age as of February 26, 2017. Elements may be performed in any order.

Tot 1	Proper way to fall and get up, march while moving
Tot 2	Two-foot hop in place, single swizzle, beginning two-foot glide
Tot 3	Push and glide stroking, dip, forward swizzle
Tot 4	Backward swizzle, two-foot or one-foot snowplow, backward wiggle
Pre-Alpha	Forward swizzle, backward swizzle, one-foot glide
Alpha	Forward stroking, forward crossovers (right over left), one-foot snowplow
Beta	Backward stroking, backward crossovers (right over left), T-stop right foot
Gamma	Left outside 3-turn, right forward inside Mohawk combination, hockey stop
Delta	Forward outside and inside edges, right forward inside 3-turn, lunge
Freestyle 1	Waltz jump, forward inside pivot, forward spiral
Freestyle 2	Half Lutz, one-foot spin, ballet jump
Freestyle 3	Toe loop or toe walley, backward spiral, dance step sequence
Freestyle 4	Loop jump, sit spin, dance step sequence
Freestyle 5	Axel, camel spin, Lutz jump
Freestyle 6	Split jump, Axel/half-loop/flip, spin combination with change of foot and position
Freestyle 7	Double toe-loop or double toe walley, flying camel, jump in opposite direction
Freestyle 8	Double flip, flying sit, double loop

There is no penalty for the number of swizzles, strokes, or crossovers performed at the Pre-Alpha, Alpha, or Beta levels; only the quality of these maneuvers will be judged.

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Individual Entry Form

Please print clearly and fax, e-mail, or turn in your entry form by **January 26, 2017**.

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Date of Birth: _____ Age: _____ Gender: _____

Name of Parent/Guardian: _____

ISI #: _____ Highest ISI/USFS Test(s) Passed: _____

Coach Name: _____ Coach Phone: _____

Coach ISI Judge Certification Level: _____

Coach E-mail: _____ Coach Signature: _____

Team Representing: _____

Are you an active USFS member who has competed at or above the Novice level at any USFS National Championship within the last two years? Yes _____ No _____

First Event: \$45 Additional Event(s): \$25 each

Please check the event(s) you would like to register for:

Tot 1-4
Solo Program _____
Solo Compulsories _____

Pre-Alpha to Delta
Solo Program _____
Solo Compulsories _____
Stroking _____

Freestyle 1 and Up
Solo Program _____
Solo Compulsories _____
Open Freestyle _____
Artistic Freestyle _____
Ensemble _____
Spotlight Character _____
Spotlight Dramatic _____
Spotlight Light Ent. _____
Jump and Spin _____
Artistic Freestyle _____

I declare that the above information is accurate, all tests are registered, and the skater is a current member of the ISI. I have read, understood, and agree to all terms and conditions in the Lakeside Competition packet. I/my child participates in this program at my/his/her own risk and hereby release ISI, Lakeside Brooklyn, and their employees, volunteers, instructors, and personnel from all liability. I declare that the above information is true. I do hereby grant and give ISI and Lakeside Brooklyn the right to use my/my child's photograph/image with or without my/my child's name, both single and in conjunction with other persons or objects for any and all purposes. I understand that there are no credits or refunds.

Card Type: _____ Card Number: _____

Name on Card: _____ Expiration Date: _____

Amount: _____ Signature: _____

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Team Entry Form

Please print clearly and fax, e-mail, or turn in your entry form by **January 26, 2017**.

\$20 per skater.

Team/Group Name: _____ Level: _____
 Rink Address: _____
 City _____ State _____ Zip _____ Phone _____
 Coach Name _____ Phone _____ Email _____
 ISI # _____ Signature: _____

Is any member an active USFS member who has competed at or above the Novice level at any USFS National Championship within the last two years? Yes _____ No _____

Please check the event(s) you would like to register for:

Ensemble _____

Jump and Spin
 Low (Pre-Alpha to Delta) _____
 Medium (FS 1-3) _____
 Intermediate (FS 1-3) _____
 High (FS 4-5) _____

Competitors

Name	Age	Date of Birth	ISI #
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

I declare that the above information is accurate, all tests are registered, and the skaters are current members of the ISI. I have read, understood, and agree to all terms and conditions in the Lakeside Competition packet. I/my child participates in this program at my/his/her own risk and hereby release ISI, Lakeside Brooklyn, and their employees, volunteers, instructors, and personnel from all liability. I declare that the above information is true. I do hereby grant and give ISI and Lakeside Brooklyn the right to use my/my child's photograph/image with or without my/my child's name, both single and in conjunction with other persons or objects for any and all purposes. I understand that there are no credits or refunds.

Card Type: _____ Card Number: _____

Name on Card: _____ Expiration Date: _____

Amount: _____ Signature: _____

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Waiver of Liability, Release Assumption of Risk & Indemnity Agreement

It is the purpose of this agreement to exempt, waive and relieve releasees from liability for personal injury, property damage, and wrongful death, including if caused by negligence, including the negligence, if any, of releasees. "Releasees" include Upsilon Ventures, LLC., Lakeside Brooklyn, LLC., its affiliate associations, local associations, member teams, event hosts, other participants, coaches, instructors, officials, sponsors, advertisers, and each of them, their officers, directors, agents and employees. For and in consideration of the undersigned participant's registration with the LeFrak Center at Lakeside, its affiliates, local associations and member teams, coaches, instructors and being allowed to participate in LeFrak Center at Lakeside instructional and recreational classes, clinics, events and member team activities, participant (and the parent(s) or legal guardian(s) of participant, if applicable) waive, release and relinquish any and all claims for liability and cause(s) of action, including for personal injury, property damage or wrongful death occurring to participant, arising out of participation in LeFrak Center at Lakeside instructional and recreational classes, clinics, events, member team activities, the sport of ice hockey, ice skating, roller skating and/or activities incidental thereto, whenever or however they occur and for such period said activities may continue, and by this agreement any such claims, rights, and causes of action that participant (and participant's parent(s) or legal guardian(s), if applicable) may have are hereby waived, released and relinquished, and participant (and parent(s)/guardian(s), if applicable) does(do) so on behalf of my/our and participant's heirs, executors, administrators and assigns. Participant (and participant's parent(s)/guardian(s), if applicable) acknowledge, understand and assume all risks relating to instructional and recreational classes and clinics including but not limited to ice hockey, ice skating, roller skating and any member team activities, and understand that these type and similar type of activities involve risks to participant's person including bodily injury, partial or total disability, paralysis and death, and damages which may arise therefrom and that I/we have full knowledge of said risks. These risks and dangers may be caused by the negligence of the participant or the negligence of others, including the "releasees" identified above.

These risks and dangers include, but are not limited to, those arising from participating with bigger, faster and stronger participants, and these risks and dangers will increase if participant participates in ice hockey, ice skating, roller skating and other similar member team activities and instructional clinics and classes in an age group above that which participant would normally participate in. I/We further acknowledge that there may be risks and dangers not known to us or not reasonably foreseeable at this time. Participant (and participant's parent(s)/guardian(s), if applicable) acknowledge, understand and agree that all of the risks and dangers described throughout this agreement, including those caused by the negligence of participant and/or others, are included within the waiver, release and relinquishment described in the preceding paragraph. I/We agree to abide by and be bound under the rules of the LeFrak Center at Lakeside.

Participant (and participant's parent(s)/guardian(s), if applicable) acknowledge, understand and assume the risks, if any, arising from the conditions and use of the LeFrak Center at Lakeside facility including but not limited to the rinks and related premises and acknowledge and understand that included within the scope of this waiver and release is any cause of action (including any cause of action based on negligence) arising from the performance, or failure to perform, maintenance, inspection, supervision or control of said areas and for the failure to warn of dangerous conditions existing at said rinks, for negligent selection of certain releasees, or negligent supervision or instruction by releasees.

As further consideration for registration and participation in LeFrak Center at Lakeside instructional and recreational classes, clinics, events and member team activities, participant (and the parent(s) or legal guardian(s) of participant, if applicable), hereby (1) consents and agrees that Upsilon Ventures, LLC., Lakeside Brooklyn, LLC., and its licensees and designees may make video and/or audio recordings of and/or otherwise film, photograph or memorialize some or all of participant's participation in such events and activities, and (2) grants to Upsilon Ventures, LLC., Lakeside Brooklyn, and its licensees, designees, successors and assigns, a worldwide, perpetual, irrevocable, fully-paid, royalty-free, transferable and sublicenseable right and license to use, copy and disseminate participant's image and personal attributes, and to modify and present same in any form, manner and media, now known or hereafter devised, for any purpose whatsoever. If the law in any controlling jurisdiction renders any part of this agreement unenforceable, the remainder of this agreement shall nevertheless remain enforceable to the full extent, if any, allowed by controlling law.

This agreement affects your legal rights, and you may wish to consult an attorney concerning this agreement. Participant (and participant's parent(s)/guardian(s), if applicable) agree if any claim for participant's personal injury or wrongful death is commenced against releasees, he/she shall defend, indemnify and save harmless releasees from any and all claims or causes of action by whomever or wherever made or presented for participant's personal injuries, property damage or wrongful death. Participant (and participant's parent(s)/guardian(s), if applicable) acknowledge that they have been provided and have read the above paragraphs and have not relied upon any representations of releasees, that they are fully advised of the potential dangers and understand these waivers and releases are necessary to participate in LeFrak at Lakeside instructional and recreational clinics, classes, events and member team activities.

I have read, fully understand, and agree to the provisions provided in the above-referenced LeFrak Center at Lakeside Waiver of Liability, Release Assumption of Risk & Indemnity Agreement.

Responsible Party Name: _____

Responsible Party Signature: _____

Date: _____