



LAS VEGAS ICE THEATRE
AUDITION FORM
2018 – 2019

Skater's Name: _____

Parent/Guardian Name: _____

Phone Number: _____

Email: _____

Skater's Age: _____ Skater's Birthday: _____

Skater's USFS Number: _____

Skater's Home Club: _____

Highest USFS Moves in the Field Test Passed: _____

Highest USFS Free Skate Test Passed: _____

Highest ISI Level Passed: _____

(Please refrain from writing in this box, it is to be used by coaches during Auditions. Thank you!)