

SUMMARY OF TEST FEES

Organization Number: _____

Organization Name: _____

Section: _____

Summary Sheet Number _____ Fees \$ _____

Summary Sheet Number _____ Fees \$ _____

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Summary Sheet Number _____ Fees \$ _____

Summary Sheet Number _____ Fees \$ _____

Summary Sheet Number _____ Fees \$ _____

Summary Sheet Number _____ Fees \$ _____

Summary Sheet Number _____ Fees \$ _____

Total Fees: _____



EFFECTIVE SEPTEMBER 1, 2003

Free Skate = \$10.00 each part
Dance = \$10.00
Skating Skills = \$10.00
Interpretive Singles/Couples = \$10.00
Competitive Singles/Pairs/Dance = \$20.00
Foreign Skaters = \$30.00 each test
Special Fees = \$1.00

Order No: _____

Amount Received: _____

Date Received: _____

Office Use Only

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