

APPENDIX A – 2023 APPLICATION for the SyS ‘TEAM’ + two Coaches
ISU Synchronized Skating Development Training Seminar - Junior Age Skaters and Coach(s)
ISU Communication No. 2530

ISU Member		DATE	
Person from the ISU Federation/Association sending the application:		Position Title	Email
First Name	Last Name		
<input type="checkbox"/> I confirm as per ISU Communication 2530 para e) that only legitimate ‘Team’ members and Coaches have been entered, the four Skaters are steady /confirmed members of the same Team and will be competing/skating during the upcoming season (2023/24) and the Coaches are coaching the participating ‘Team’.			
COACH INFORMATION			
HEAD COACH		Email	Mobile
First Name	Last Name		
ASSISTANT COACH		Email	Mobile
First Name	Last Name		
Length of time coaching SYS	Head Coach	Assistant Coach	
SKATER INFORMATION			
Name of Skater 1:		Date of birth (Day/Month/Year):	
First Name	Last Name		
Name of Skater 2:		Date of birth (Day/Month/Year):	
First Name	Last Name		
Name of Skater 3:		Date of birth (Day/Month/Year):	
First Name	Last Name		
Name of Skater 4:		Date of birth (Day/Month/Year):	
First Name	Last Name		
Team Name		Team Category	
Has this Team previously attended an ISU development Seminar?		Yes <input type="checkbox"/>	What year(s) <input type="checkbox"/> No <input type="checkbox"/>
What is the highest level competition that the TEAM will enter in the 2023-24 season?		Domestic, International, Jr SyS World Championships, SyS Championships	
Is this a new Team for this season?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Please email to:

Ms. Cathy Dalton

Email: cathy.dalton@isu.org

Mr. Philippe Maitrot

Email: philippe.maitrot@isu.org

ISU Secretariat

Email: development@isu.ch