

CENTRAL IOWA FIGURE SKATING CLUB

2018 Winter Show

"Snowfall and Showtunes"



A Benefit Show for the *Blank Children's Hospital* *Unity Point Health*



Information - Details

When:	Saturday, December 15th@ 1:30 pm-4:30pm The Winter Ice Show is to benefit Blank Children's Hospital – Unity Point Health. Participants will skate to the appropriate to the theme music. (check with your coach)
Location	Buccaneer Arena - 7201 Hickman Road, Urbandale, IA 50322
Show Directors	Elena Tobiash & Igor Velikanov centraliowafsc@gmail.com Cell phone/text: 515-490-5148
Coaching Team	Elena Tobiash , Skate Director, Principal Coach; Igor Velikanov , Principal Coach; Burton Powley , Principal Coach Inna Kuznetsova , Coach; Dylan Perkins , Coach
Eligibility	You must be a CIFSC member or a CIFSC Learn-to-Skate participant. Non-members must contact Elena Tobiash. CIFSC Learn To Skate (LTS) participants will perform in a group number specifically choreographed to emphasize the novice skating moves and elements. Music for all group numbers will be selected by the show's artistic director or coach.
Registration Deadline	November 15th, 2018 (Accept late registrations with an additional \$20 late fee, if space allows.) Solo skaters; please provide your music to CIFSC Skate Director Elena Tobiash, by November 15th 2018 . <i>For free assistance in editing music, email kotmul@inbox.ru</i>
General Requirement	Skaters must bring a long blanket on the day of the show.

Music and Performance Requirements	<p>Skaters below Juvenile level: Solo number cannot exceed 1 minutes and 40 seconds.</p> <p>Advanced skaters, Intermediate level and beyond: Discuss music length with CIFSC principal coaches & coach.</p> <p>Each CIFSC member can perform one solo number and one group number in addition to participation in the group numbers.</p> <p>Additional skater solo and group performances must be approved by Principal coaches.</p>
Registration and Fees	<ul style="list-style-type: none"> • LTS Skaters: \$40 per skater 2nd skater per family: \$20 • CIFSC Individual Skaters: \$85 per skater • Additional numbers: \$30 each • 2nd skater per family: \$45 • Tickets: \$5 per individual, \$15 for family • Registered Skaters will receive 2 family member tickets free. • Donations will be accepted at the door.
	<p>Sponsorship: sponsorship is encouraged</p> <p>Each family is asked to contact businesses for financial contributions. In lieu of contacting the businesses, a skater may choose to make a \$30.00 personal donation to the show. All skaters will receive a credit equal to 10% of the amount if they collect \$50 or more from businesses. The credit will be applied towards the skater's ice fees.</p>
	<p>***The Ice Show relies on the service of volunteers for a successful show. One family member will be asked to volunteer for a show committee during this period in addition to assisting with the actual production.</p> <p>We need help with the following committees: Publicity, Set-up and tear-down, Practice Ice Monitor and/or Check-in, Hospitality and Ushers.</p> <p>I agree to volunteer for the following committee(s):</p> <p>(1) Publicity (2) Set-up and tear-down (3) Practice Ice Monitor and/or Check-in (4) Hospitality/Ushers</p>

Entry Form – CIFSC 2018 Winter Show

Saturday, December 15, 2018 at 1:30-4:30 pm
Buccaneer Arena, 7201 Hickman Road, Urbandale, IA 50322

Skater Name: _____
(This will be how the name will be announced and how it appears in the program)

Birth Date: _____ **Current Age:** _____ **Skating Level:** _____

E-mail _____

PLEASE NOTE: E-mail is the preferred form of communication for practice schedules, show information, etc. Please use an e-mail address you monitor regularly. *Central Iowa Figure Skating Club respects your privacy and will never share your e-mail address.

Address: _____ **City:** _____ **Zip Code:** _____

Parent / Guardian name(s): _____

Phone Numbers: Home: _____ Work: _____ Cell: _____

Liability Waiver and Emergency Medical Consent: I hereby release the Central Iowa Figure Skating Club, its affiliates, professional staff, club officers, and Board members from any and all liabilities as a result of personal injury that may be sustained by me/my child. In the event of injury, I authorize the Central Iowa Figure Skating Club to seek on my child's behalf whatever medical treatment the Club may deem necessary.

Skater Signature: X _____ **Date:** _____

Parent Signature: X _____ **Date:** _____

(parent / guardian if under 18)

Registration Fees	Price
Individual Registration (includes team group opening/closing number if enrolled.)	\$85
2 nd Skater Registration (same family)	\$45
Learn to Skate (LTS) Participant - per skater	\$40
2 nd LTS skater per family	\$20
Sponsorship is welcomed and encouraged	\$_____
Additional Ticket for individuals # _____	\$5 each
Family tickets	\$15
Late registrations with an additional \$20	\$20
Total Amount enclosed	\$_____

**Please complete and return with cash or a check payable to "CIFSC"

Volunteering responsibilities

(please mark all that applies)

Volunteer Name: _____

Setting the rink up_____

Cleaning the rink after the show _____

Stage Parent_____

DJ_____

Fundraising committee _____

Advertising committee_____

Planning committee_____

Rink decorations_____

Food table supervisor_____

Hospitality/Usher _____

Every family is in charge of bringing a food dish and drinks.

Every family is encouraged to look for the sponsors for our club and the show.

Please ask for a sponsorship letter from the Skate Director, Elena Tobiash.