

BABSON COLLEGE SKATING SCHOOL

1ST ANNUAL



BABSON BLAST 2010
SATURDAY MAY 22, 2010

ELIGIBILITY & RULES

Events: All events and tentative times are included in this packet.

Rules: This competition will be run in accordance with the latest rules and requirements as published by the ISI National office. All coaches, judges and participants should be familiar with the ISI requirements.

Eligibility: This competition is open to all current ISI members only, up to and including the date of the competition. All competitors 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 event. All competitors must represent a current ISI administrative arena.

Skaters are expected to compete at their true ability level and to uphold high ethical standards.

If a US skater has passed the following FS test, they may compete no lower in IS then:

Pre-Preliminary	Freestyle 3	Open Bronze FS
Preliminary	Freestyle 4	Open Silver FS
Pre-Juvenile	Freestyle 4	Open Silver FS
Juvenile	Freestyle 6	Open Gold FS
Intermediate	Freestyle 6	Open Gold FS
Novice	Freestyle 7	Open Platinum FS
Junior	Freestyle 8	Open Platinum FS
Senior	Freestyle 8	Open Platinum
Adult Bronze	Freestyle 3	Open Bronze FS
Adult Silver	Freestyle 4	Open Silver FS
Adult Gold	Freestyle 5	Open Gold FS

These are the minimum requirements and USFS Moves in the Field tests have no bearing on any ISI test level. USFS adult skaters, age 21 and older may petition the competition director for permission to compete lower than levels listed above.

Verification: All skaters test levels and membership will be verified through the ISI office prior to the competition. The team coach must sign all entry forms to indicate that the information on the form is correct.

Music: CD's and Cassette tapes will be accepted. Tapes should be rewound and must have proper label on the correct side of the tape with the skater's name. Music should be handed in 1 hour prior to the event and all skaters should have a back up of their music just in case. Dancers may provide their own music for each dance or use music provided from Babson. If a skater is doing multiple dance please put all music on separate CD's/Cassettes.

Awards: Awards will be given for all placements.

Entry Fees: Skaters should make their checks payable to their home club and the team coach will send one check with all applications and judges forms in a single packet to the host rink. ***Please return packet to: Stefanie DeSimone 4 Bishop St #504 Framingham, MA 01702***

BABSON BLAST
MAY 22, 2010
ENDORSEMENT 1-1273-2010

Tentative Schedule: 11:30am start time

Stroking PA-D
PA-D
Ice Dance 1-3
FS 1-4
Art 5-10
Jump & Spin Low-Med
FS 5-10
Art 1-4
Ice Dance 4-7
Couples - All
FS Open – All Levels
Jump & Spin Int-High
Synchro - All

Jump & Spin:

Low: PA-D	2 Ft hop/Bunny hop 2 Ft. Spin
Med: FS 1-3	½ Flip / Toe Loop 2 Ft. Spin / 1 Ft. Spin
Int: FS 4-5	½ Loop / Axel Sit Spin / Back Spin
High: FS 6-10	Dbl Salchow/Dbl Loop Fly Camel / Fly Sit

Stroking: Competitors will pick up numbers at registration and check in with the Ice Capt. 30min prior to the event.

Directions: Babson Skating Center 150 Great Plain Avenue: Wellesley, MA 02181

From I-95/Route 128 Southbound:

- Take I-95/Route 128 South to Exit 21B (Route 16 West towards Wellesley)
- Take a right off the exit ramp onto Route 16 West (Washington St.)
- Follow Route 16 West for 1.5 miles
- Take a left onto Route 135 East towards Needham
- Stay on Route 135 past the rotary and up a hill
- You will see a sign for the Babson Skating Center on your left.
- The skating center is located next to the Boston Sports Club.

From I-95/Route 128 Northbound:

- Take I-95/Route 128 North to Exit 18 (Great Plain Avenue)
- Take a right off the exit ramp onto Great Plain Avenue towards Needham
- Follow Great Plain Avenue for 3.8 miles
- The skating center is on the right .3 miles after the entrance to Olin College.
- The skating center is located next to the Boston Sports Club.

From Route 9 Westbound:

- Take Route 9 West to the Wellesley Exit (Route 16)
- You will see signs directing you towards Babson College
- Take a left onto Route 16 West (Washington St.)
- Follow Route 16 West for approximately 1/4 mile
- Take a left onto Route 135 East towards Needham
- Stay on Route 135 past the rotary and up a hill
- You will see a sign for the Babson Skating Center on your left.
- The skating center is located next to the Boston Sports Club.

BABSON BLAST

MAY 22, 2010

LOCATION: 150 GREAT PLAIN AVE, WELLESLEY, MA 02482

INDIVIDUAL ENTRY FORM

Name _____ Phone(_____)_____

Address _____ Age as of 5/22/10 _____ DOB _____

City/St/Zip _____ ISI # _____ Sex _____

High Level Passed (ISI) _____ High Level Passed (USFS) _____

Must be returned by: April 26, 2010

I wish to compete is:

Stroking _____ PA-D _____ FS 1-10 _____ Open Bronze _____

Open Silver _____ Open Gold _____ Special Skater _____ *(will skate where level is listed in the schedule)*

Open Platinum _____ Artistic _____ Couples _____

Jump & Spin: Low _____ Med _____ Int _____ High _____

(Couple/J&S Events) Partner _____ ISI# _____ Age _____ Sex _____

Entry Fees:

__ Single Entry \$45.00

__ Family Entry \$35.00 (each add. Family member 1st event)

__ Second Event \$20.00

__ Additional Events \$10.00 each

__ Team Event \$15.00 (teams of 6 or more skaters)

__ Judge Fee \$ _____

Total Fee \$ _____ **(there will be no refunds)**

Turn in entry form and check to your team coach. All applications and one team check will be forwarded to Babson College by your team coach. **Team coach, make check payable to Babson College.**

I skate at this competition at my own risk for _____ team and hereby release Babson College, Babson Skating Center, Babson College Skating School and staff from all liability.

Signature of Skater _____ Date _____

Signature of Parent _____ Date _____

BABSON BLAST

MAY 22, 2010

LOCATION: 150 GREAT PLAIN AVE, WELLESLEY, MA 02482

DANCE ENTRY FORM

Name _____ Phone(_____)_____

Address _____ Age as of 5/22/10 _____ DOB _____

City/St/Zip _____ ISI # _____ Sex _____

High Level Passed (ISI) _____ High Level Passed (USFS) _____

Must be returned by: April 26, 2010

I wish to compete is:

Dance Events: Solo _____ Similar _____ Mix _____ Pro Partner _____

Partner _____ ISI # _____

Dance 1

__ Chasse Sequ.
__ Progressive Sequ.

Dance 2

__ Swing Rolls
__ Dutch Waltz

Dance 3

__ Canasta
__ Rhythm

Dance 4

__ Swing Dance
__ Cha Cha
__ Fiesta

Dance 5

__ Hickory
__ Willow Waltz
__ Ten Fox

Dance 6

__ 14 Step
__ European
__ Foxtrot

Dance 7

__ America Waltz
__ Tango
__ Rocker Foxtrot

Dance 8

__ Kilian
__ Blues

Dance 9

__ Paso Doble
__ Starlight Waltz
__ Quickstep

Dance 10

__ Westminster Waltz
__ Argentine Tango
__ Viennese Waltz

Entry Fees:

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__ Family Entry \$35.00 (each add. Family member 1st event)
__ Second Event \$20.00
__ Additional Events \$10.00 each
__ Team Event \$15.00 (teams of 6 or more skaters)
__ Judge Fee \$_____
Total Fee \$_____ (there will be no refunds)

Turn in entry form and check to your team coach. All applications and one team check will be forwarded to Babson College by your team coach. **Team coach, make check payable to Babson College.**

I skate at this competition at my own risk for _____ team and hereby release Babson College, Babson Skating Center, Babson College Skating School and staff from all liability.

Signature of Skater _____ Date _____

Signature of Parent _____ Date _____

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LOCATION: 150 GREAT PLAIN AVE, WELLESLEY, MA 02482

TEAM ENTRY FORM

Name of Team _____ Team Representing _____

ISI Team Number _____ Date _____

Team Address _____

City/State/Zip _____

Synchronized Formation Compulsory _____

Synchronized Skate Compulsory _____

Synchronized Formation _____

Synchronized Skate _____

Tot Team (Maj. 6 and under) _____

Jr. Youth Team (Maj. 8 and under) _____

Youth Team (Maj. 9-11 yrs) _____

Sr. Youth (Maj. 12-14 yrs) _____

Teen Team (Maj. 14-19yrs) _____

Adult Team (Maj. 20 and older) _____

Please list skaters Name, Age (as of July 1, 2009) and ISI Number

1. _____

11. _____

2. _____

12. _____

3. _____

13. _____

4. _____

14. _____

5. _____

15. _____

6. _____

16. _____

7. _____

17. _____

8. _____

18. _____

9. _____

19. _____

10. _____

20. _____

*Please star any crossover skaters

Entry Fee: \$15.00 per skater Number of Skaters _____ Total Fee Enclosed \$ _____

I declare the above information is true and these skaters are current ISI Members. I have notified the TEAM that they skate at their own risk.

Signature of Team coach _____ Date _____

Phone _____ Email _____

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LOCATION: 150 GREAT PLAIN AVE, WELLESLEY, MA 02482

Name of Rink/Team _____ Tel. # _____

Address _____

City/State/Zip _____

Team Coach _____ Email _____

Please provide at least 1 judge for every 10 events

Name _____ Judge Level: Bronze Silver Gold Team

Address _____ City/State/Zip _____

Phone/Email _____ Highest level you coach _____

Name _____ Judge Level: Bronze Silver Gold Team

Address _____ City/State/Zip _____

Phone/Email _____ Highest level you coach _____

Name _____ Judge Level: Bronze Silver Gold Team

Address _____ City/State/Zip _____

Phone/Email _____ Highest level you coach _____

Name _____ Judge Level: Bronze Silver Gold Team

Address _____ City/State/Zip _____

Phone/Email _____ Highest level you coach _____

Please return this to:

Stefanie DeSimone: 4 Bishop St #504 Framingham, MA 01702

sdesimone@babson.edu

781-239-6058