



**SKOPJE ON ICE 2018**  
**OPEN NATIONAL FIGURE SKATING COMPETITION**  
**INTERCLUB FIGURE SKATING COMPETITION**



**ENTRY FORM**

**This form must be returned before 08.02.2018**

FEDERATION: \_\_\_\_\_

CLUB: \_\_\_\_\_

**1. COMPETITORS**

	NAME	SURNAME	BIRTH DATE	SEX M/F	CATEGORY
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					

**2. JUDGES/SUBSTITUTES**

	NAME	SURNAME
JUDGE		
SUBSTITUTE		
JUDGE		
SUBSTITUTE		



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### 3. COACHES

	NAME	SURNAME
1.		
2.		
3.		
4.		
5.		

### 4. TEAM DOCTOR/PHYSIOTHERAPIST

(a certification of profession of a doctor or physiotherapist must be attached.)

	NAME	SURNAME	FUNCTION
1.			
2.			

### 5. CHAPERONES

	NAME	SURNAME
1.		
2.		
3.		
4.		
5.		

Date, Name, Signature: \_\_\_\_\_

Please mail not later than 08.02.2018 on: [skatingfederationmk@gmail.com](mailto:skatingfederationmk@gmail.com)