



## Pre-Alpha Test Sheet

Skater Name \_\_\_\_\_ ISI # \_\_\_\_\_ Gender \_\_\_\_\_

Skater Birthdate \_\_\_/\_\_\_/\_\_\_ Address \_\_\_\_\_

Email Address \_\_\_\_\_ Phone # \_\_\_\_\_

Test Date \_\_\_\_\_ City / State / Zip \_\_\_\_\_

Judge Name \_\_\_\_\_ Prof. # \_\_\_\_\_ Rink \_\_\_\_\_

*Test results should be registered with the ISI office on the Test Registration spreadsheet.*

### MANEUVERS:

Pass

Incomplete

2-Foot Glide \_\_\_\_\_

1-Foot Glide – Left Foot \_\_\_\_\_

1-Foot Glide – Right Foot \_\_\_\_\_

Forward Swizzles \_\_\_\_\_

Backward Wiggles \_\_\_\_\_

Backward Swizzles \_\_\_\_\_

TEST RESULT:    **PASS** \_\_\_\_\_    **INCOMPLETE** \_\_\_\_\_

### Notes:

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