



# 2024 ISI MinneShowdown

Location: Doug Woog Arena • South St. Paul, MN  
 Event Date: April 6, 2024 • Entry Deadline: Feb. 1, 2024

Email entry form with payment to: Kim Hansen • khansen@skateisi.org  
 (NOTE: Checks will not be accepted)  
 Tel: 972.735.8800 • www.skateisi.org

**2024 Theme**  
**Back to the '80s**  
*Grab your leg warmers, hair  
 crimper and neon gear,  
 and give us your most Rad  
 program!*

**YOUR INFORMATION** (Please Print) Current ISI Members of all ages are eligible to participate.

Name of Team	Home ISI Member Rink/Club		
Coach Name	Coach Professional ISI #	Coach Certification Level	
Coach Phone # (Required)	Coach Email (Required)		
Team Manager Name	ISI #	Phone # (Required)	Email (Required)

**WE WISH TO ENTER:** (Important: Use one (1) team entry form per team, per event. Please send team photo with entry.)

- Ensemble   
  Kaleidoskate Team   
  Pattern Team   
  Production Team   
  Team Compulsories: \_\_\_\_\_ Level  
 Theater Production   
  Themed Production - "Back to the '80s"

**TEAM MEMBERS:** PLEASE ATTACH TEAM ROSTER WITH REQUIRED INFORMATION OR CLEARLY PRINT INFORMATION BELOW

Name	USFSA	Age	ISI #	Name	USFSA	Age	ISI #
1				13			
2				14			
3				15			
4				16			
5				17			
6				18			
7				19			
8				20			
9				21			
10				22			
11				23			
12				24			

Use additional sheet for more than 24 skaters.

**Be sure to sign here!**

There will be NO REFUNDS. Individual memberships must be current through event. Expired membership renewals must accompany this entry application.

Upon entering this competition, we hereby agree that any photographs or video taken of our team by ISI or authorized party may be used exclusively for any purpose by the ISI or any other use authorized by ISI.

I declare that the information above is true and that all skaters have current individual memberships with ISI. I have notified all team members that they skate at their own risk, and hereby release ISI, the host facilities and their owners, officers, directors, officials and personnel from all liability.

Coach signature \_\_\_\_\_ Date \_\_\_\_\_  
 (Judge/Coach/Team Mgr. credential info at skateisi.org)

**PAYMENT INFORMATION**

Credit Card # \_\_\_\_\_ Exp. date \_\_\_\_\_  
 Card Security Code \_\_\_\_\_ Card Billing Zip Code \_\_\_\_\_  
 Cardhold (please print) \_\_\_\_\_ Authorized Signature \_\_\_\_\_

**TEAM ENTRY FEES** (All amounts are U.S. Dollars)

**\$45 per person. (\$900 maximum per team)**

- Team event entry # skaters \_\_\_\_\_ x \$45 =  
 \$ \_\_\_\_\_

Fee for teams representing non-member clubs \$99 = \$ \_\_\_\_\_

Entry total \$ \_\_\_\_\_

Processing fee \$ 5 \_\_\_\_\_

Total \$ \_\_\_\_\_

(Checks will NOT be accepted. All payments must be by credit card and all forms must be emailed to Kim Hansen at khansen@skateisi.org)

IF ACCEPTED, ENTRY FEES WILL BE DOUBLED AFTER ENTRY DEADLINE! ANY CHANGES TO THIS ORIGINAL ENTRY FORM WILL RESULT IN A CHANGE FEE OF \$25 PER CHANGE/PER SKATER.

**OFFICE USE ONLY**

Date received \_\_\_\_\_ Initials \_\_\_\_\_

