

Dear Edith Scheonrock Competition Skater,

Practice ice is scheduled in each arena as shown below and may be purchased for **\$8.00** per twenty minute session on a first come basis. Paid reservations will be processed in the order they are received. If a session is full, you will be given your back-up choice(s) if marked (or the next best session for which the skater qualifies). **No confirmation will be sent** if your first choice(s) **can** be accommodated. If assigned your back-up choice, you will be notified by e-mail/phone.

Please mail **reservation form with check** written to **Port Huron Figure Skating Club in US funds** by **Friday January 30, 2004** to:

**PHFSC Edith Schoenrock Competition Practice Ice
3445 Timberline Dr.
North Street, MI 48049**

Please note session qualifications below. All reservations must be in writing, accompanied by check, and postmarked by Friday, January 30, 2004. MAIL EARLY!

SESSION QUALIFICATIONS

LOW: preliminary freestyle and lower

HIGH: pre-juvenile freestyle and higher

PAVILION ICE

Friday, Feb. 6 2004 A.M.

| | | | |
|---------|----------|-----------|-------------|
| Session | A | 6:10-6:30 | OPEN |
| | B | 6:30-6:50 | OPEN |
| | C | 6:50-7:10 | LOW |
| | D | 7:10-7:30 | LOW |

Saturday, Feb. 7 2004 A.M.

| | | | |
|---------|----------|-----------|-------------|
| Session | I | 6:10-6:30 | OPEN |
| | J | 6:30-6:50 | OPEN |
| | K | 6:50-7:10 | LOW |
| | L | 7:10-7:30 | LOW |

Sunday, Feb. 8 2004 A.M.

No practice ice in Pavilion

MAIN ARENA ICE

Friday, Feb. 6 2004 A.M.

| | | | |
|---------|----------|-----------|-------------|
| Session | E | 6:10-6:30 | OPEN |
| | F | 6:30-6:50 | OPEN |
| | G | 6:50-7:10 | HIGH |
| | H | 7:10-7:30 | HIGH |

Saturday, Feb. 7 2004 A.M.

| | | | |
|--|----------|-----------|-------------|
| | M | 6:10-6:30 | OPEN |
| | N | 6:30-6:50 | OPEN |
| | O | 6:50-7:10 | HIGH |
| | P | 7:10-7:30 | HIGH |

Sunday, Feb. 8 2004 A.M.

| | | | |
|---------|----------|-----------|-------------------|
| Session | Q | 6:10-6:30 | DANCE/OPEN |
| | R | 6:30-6:50 | OPEN |
| | S | 6:50-7:10 | HIGH |
| | T | 7:10-7:30 | HIGH |

Check in for practice ice with the ice monitor IN THE DESIGNATED ARENA fifteen minutes prior to your session.

SAVE THIS SHEET AND RECORD REQUESTED SESSIONS. WE WILL NOTIFY YOU OF ANY CHANGES AND THIS SHEET WILL BE HELPFUL IF CHANGES ARE REQUIRED!

Competition Registration/Check-in is in the MAIN Arena. Skater may report to practice ice prior to Competition Registration. Practice ice sessions not filled by advance reservation, or extra sessions if available, may be purchased at Registration/Check-in in the Main Arena at the competition. Please check upon registering for late reservations or changes, and/or to confirm misplaced times.

PRACTICE ICE RESERVATION FORM

2004 EDITH SCHOENROCK INTERNATIONAL COMPETITION
PORT HURON FIGURE SKATING CLUB

Skater's Name _____ Level _____ Low/High
(circle one)

Address _____ Phone _____

_____ Work/cell phone _____
(for message)

e-mail _____

Register me for session letter(s): First choices _____

Back up choices _____

Total number of sessions _____ X \$8.00 per session = \$ _____ Total enclosed

_____ I understand that practice ice sessions are filled on a first come basis and I have checked the level requirements. If my first choice sessions are filled, place me in my back up sessions. I understand I will be notified by e-mail/phone if first choices are unavailable.

Signature _____ Date _____

Please record requested sessions on the schedule for future reference or keep copy of this form.