Gold Medal Recipients Information

Name Engraved on Medal
Gold Medal Recipient: ____________________________________________

Ship Medal to
Name and Address: ______________________________________________
________________________________________
________________________________________
________________________________________

Gold Medals Earned

<table>
<thead>
<tr>
<th>Category</th>
<th>Earned</th>
<th>Category</th>
<th>Earned</th>
</tr>
</thead>
<tbody>
<tr>
<td>Am Solo Dance</td>
<td>_____</td>
<td>Intl Solo Dance</td>
<td>_____</td>
</tr>
<tr>
<td>Am Team Dance</td>
<td>_____</td>
<td>Intl Team Dance</td>
<td>_____</td>
</tr>
<tr>
<td>Circle Figure</td>
<td>_____</td>
<td>Loop Figure</td>
<td>_____</td>
</tr>
<tr>
<td>Inline Freestyle</td>
<td>_____</td>
<td>Quad Freestyle</td>
<td>_____</td>
</tr>
<tr>
<td>Inline Speed</td>
<td>_____</td>
<td>Quad Speed</td>
<td>_____</td>
</tr>
</tbody>
</table>

Skater’s Info

Home Rink: _____________________________________________________

Rink City: _____________________________________________________ State: ______

Coach: _______________________________________________________ Coach ID: ______

Gold Medal Test Center Info

Test Date: ___________ Test Director: _____________________________

Test Rink: _____________________________________________________ Rink ID: ______

Contact Info for questions: _______________________________________

Each Gold Medal recipient **MUST** have this form completed and submitted with all other Test forms to receive their Gold Medal. Multiple Gold Medals per skater can be recorded on one form.