



2019 PSA CONFERENCE & TRADE SHOW

Judge Registration

May 22-25, 2019

GENERAL INFORMATION *{please print}*

Name _____ PSA # _____

Address _____

Phone _____ E-mail _____

Please check any that apply:

- I will use PSA bus transportation to the U.S. Open on Tuesday, May 21
- I would like to be on the roommate list I would like to attend the Newcomer's Meeting I would like to volunteer

REGISTRATION FEES | *Registration by April 15, 2019 is encouraged for planning purposes*

Judge Registration \$100

*U.S. Figure Skating Judge Number _____

EXTRAS

	Before April 15, 2019	After April 15, 2019
Awards Dinner <i>Thursday, May 23, 7:00pm</i>	<input type="radio"/> \$80	<input type="radio"/> \$95
First Aid/CPR Certification <i>Wednesday, May 22, 8am-12:00pm</i>	<input type="radio"/> \$30	<input type="radio"/> \$30

DONATION RAFFLE

I would like to donate to the PSF Walter and Irene Muehlbronner Scholarship Award. \$ _____

Win a free entry to the 2019 PSA Conference!
 *for every dollar donated, your name will be entered into a drawing for the chance to receive free registration to the next Conference or Ratings Prep. For example, \$5 donated equals five entries into the drawing. Contact the PSA office for more details.

The Professional Skaters Foundation (PSF) was founded to expand the educational opportunities of PSA members through a 501(c)(3) non-profit, charitable foundation. A scholarship program is available to PSA members through the PSF.

FOR MORE DETAILED INFORMATION, PLEASE VISIT WWW.SKATEPSA.COM **TOTAL**

PAYMENT INFORMATION

\$ _____

MasterCard, Visa, American Express or Discover
 _____ Exp. Date _____ CVV _____

CANCELLATION POLICY

Requests for cancellation MUST be made in writing and received in the PSA office by April 21, 2019. A non-refundable administration fee of 25% will be retained. NO transfers of conference registrations and NO refunds for cancellations or "no shows" will be made after this date. The only exceptions will be a major medical problem affecting the registrant and confirmed in writing by a licensed physician or a death in the immediate family occurring during the scheduled conference dates, in which case the PSA office must be notified in writing within two weeks following the conference. NO requests will be honored after two weeks. If approved, a credit in the amount of the current conference registration fee will be given for the following year's conference only. Refunds or credits will be issued to the affected registrant ONLY and are NON-TRANSFERABLE.

I, the undersigned, understand and agree to the above cancellation policy.

signature _____

Each person attending the conference must complete a separate form. The full registration fee must accompany this form. There will be a \$25 charge on all returned checks or invalid credit card numbers

Make checks payable to PSA and return with signed registration form to:

PSA
 3006 Allegro Park SW
 Rochester, MN 55902

or scan/email
 EMAIL office@skatepsa.com