

SWP REGIONAL CRITIQUE REGISTRATION AND PLANNED PROGRAM COMPONENTS

Skater Name:				
Phone Number:	Email:			
Level:	Coach:			
PLAN	NNED PROGRAM COMPONENTS			
Element – Confirmed by Coach	Comments – FOR JUDGES USE ONLY			
I				
OVERAL PROGRAM AND	SKATER COMMENTS - FOR JUDGES USE ONLY			

SKATER BIOGRAPHY

Please provide 3-4 sentences about the Skater's competitions, name of their school and grade level, city he/she lives in and the name of your coach.

inoor and nives in iv	Aira Mesa. She is co	odened by Brean	 ,