

RSA SPEED ACHIEVEMENT TEST – One test per Skater				# of Laps	Times
Test Taken: Quad Speed Inline Speed		Level			
Test Date:		Test Rink ID:			
Skater's Name (Please Print):					
Skaters Home Rink:				Referee Signature X	
All information appearing herein is true to the best of my knowledge				Referee Signature X	
Skater's Signature:		Coach ID:		Referee Signature X	
Coach's Name: (Please Print)		Coach ID:		Referee Signature X	
 RSA Copy Remember to Keep a copy for your records		Fee: \$	Collected: <input type="checkbox"/>	Time to Pass	Circle One PASSED / FAILED

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