

# Cartersville Twisters

Nifty November 2018

November 3-4, 2018

AAU Sanctioned

Club: \_\_\_\_\_ Gym Phone \_\_\_\_\_

Address \_\_\_\_\_ City/St/ZIP \_\_\_\_\_

Coach E-Mail \_\_\_\_\_ Club # \_\_\_\_\_

Coach Contact phone number \_\_\_\_\_

Coach: \_\_\_\_\_ AAU No. \_\_\_\_\_

Coach: \_\_\_\_\_ AAU No. \_\_\_\_\_

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Coach: \_\_\_\_\_ AAU No. \_\_\_\_\_

Coach: \_\_\_\_\_ AAU No. \_\_\_\_\_

**It is ABSOLUTELY ESSENTIAL that CORRECT birth dates are included on the entry form.**  
Please use separate form for each level

|    | Name of Gymnast | USA # | Age | Birthdate | Level |
|----|-----------------|-------|-----|-----------|-------|
| 1  |                 |       |     |           |       |
| 2  |                 |       |     |           |       |
| 3  |                 |       |     |           |       |
| 4  |                 |       |     |           |       |
| 5  |                 |       |     |           |       |
| 6  |                 |       |     |           |       |
| 7  |                 |       |     |           |       |
| 8  |                 |       |     |           |       |
| 9  |                 |       |     |           |       |
| 10 |                 |       |     |           |       |
| 11 |                 |       |     |           |       |
| 12 |                 |       |     |           |       |
| 13 |                 |       |     |           |       |
| 14 |                 |       |     |           |       |
| 15 |                 |       |     |           |       |

**Entry Deadline: Received October 19, 2018**

**Send Association check only :**

Cartersville Twisters Booster Club  
P. O. Box 200625  
Cartersville, GA 30120

Tel: 770-387-5629

0 of gymnasts @ \$60 = 0  
Team fee \$40 =

Total = 0

Check #

Sheet1

Sheet2

Sheet3

Sheet4

Sheet5

Sheet6

Sheet7

Sheet8

Sheet9

Sheet10