

The Texas Shootout / Jan. 12-14, 2018

Meet Entry Form--Due December 1, 2017

Club Name: _____ **USAG Club #** _____ **Phone #** _____
Street Address: _____ **Fax #:** _____
City: _____ **State:** _____ **Zip:** _____
Attending Coach: _____ **USAG #:** _____ **Safety Exp.:** _____
Attending Coach: _____ **USAG #:** _____ **Safety Exp.:** _____
Attending Coach: _____ **USAG #:** _____ **Safety Exp.:** _____

Please list gymnasts by Level and Date of Birth.

	First	/	Last	Level	USAG #	Date of Birth
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

Meet Director's Use	
Date Rec'd:	
Check # :	
Amount:	\$
Short/Over:	
Entered:	Email Conf:

_____ Level 3-5: # X \$85 Entry Fee	\$
_____ Level 6-10: # X \$110 Entry Fee	\$
_____ Early Bird Discount # X \$5 Per Entry	\$
Discount applies to all entries received by Nov 1 st , 2017	
_____ # of Team Entries @ \$50 each =	\$
_____ Late Fee-after 12/1/17 # X \$5 per entry	\$
Check Payable to Texas Shootout:	\$

Late entries will only be accepted at the discretion of the meet host. Please contact the meet host prior to sending a late entry. I acknowledge that I am familiar with the *USAG Rules & Policies* and with the USAG directives for each level. I have read and understand all information pertaining to this meet. **I understand that I am responsible for the correctness of names, USAG numbers, levels, DOB, age groups and other information required on this form. I know that all coaches must have and display a current pro and safety certification in order to be on the competitive floor.**

Contact Name: _____ **Signature:** _____
Contact Ph#: _____ **E-Mail (Required)** _____

Please mail form and payment to: Olympia Hills Gymnastics, 2122 Green Meadows Ln, Buda, Texas 78610