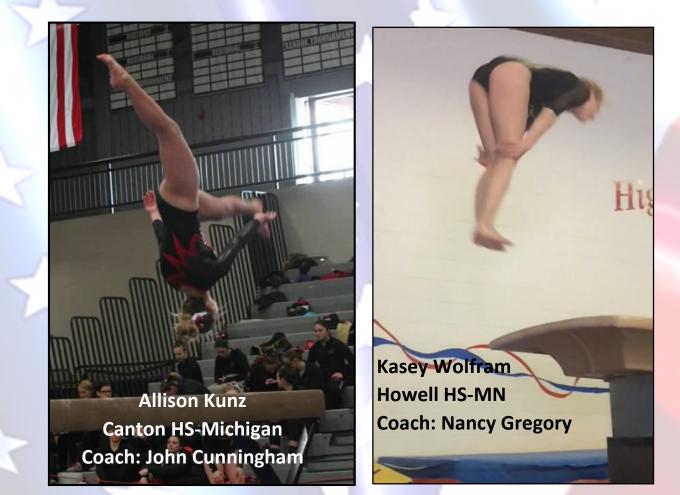
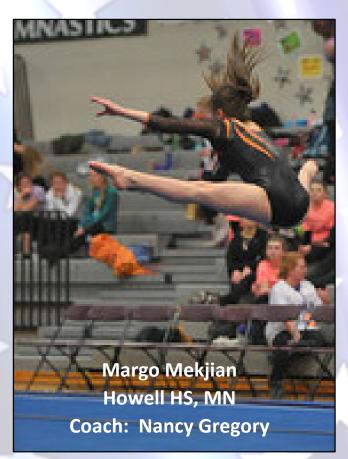
# ALL AMERICAN CALENDAR 2016

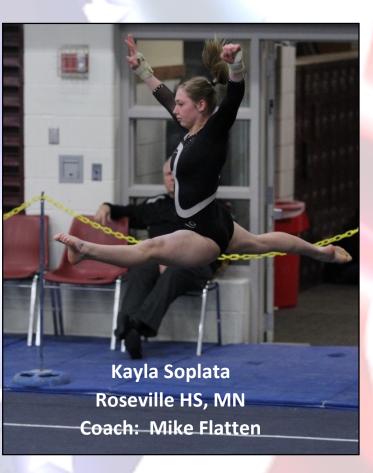


✓ <u>December</u>		~	January 201	6 ~		<u>February</u> ►
Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1 New Year's Day	2
3	4	5	6	7	8	9
10	<b>11</b> Human Trafficking Awareness	12	13	14	15	16
17	18 Martin Luther King	19	20	21	22	23
24	25	26 Australia Day	27	28	29	30

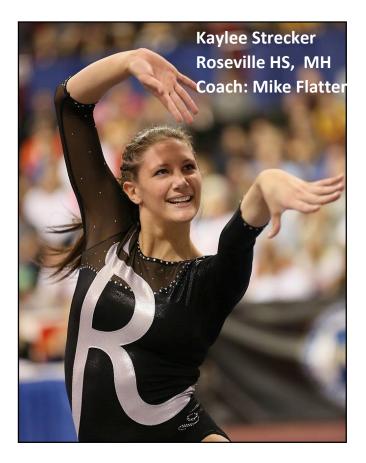


✓ January	₄ January ~ February 2016 ~ March ▶								
Sun	Mon	Tue	Wed	Thu	Fri	Sat			
	1	2 Groundhog Day	3	4	5	6			
7 Super Bowl	8 Chinese New Year	9	10	11	12	13			
<b>14</b> Valentine's Day	15 Presidents Day	16	17	18	19	20			
21	22	23	24	25	26	27			

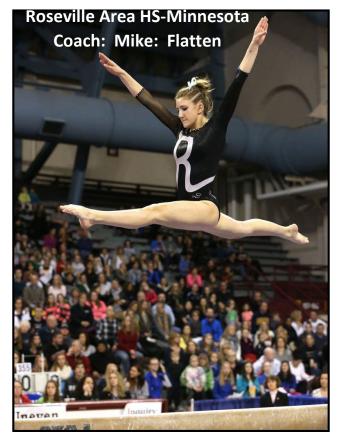




<ul> <li>February</li> </ul>			~ March 20 <sup>°</sup>	16 ~		April ►
Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
6	7	8 International Women's Day	9	10 World Kidney Day	11	12
<b>13</b> Daylight Saving Time Begins	14	15	16	<b>17</b> Saint Patrick's Day	18	19
20 Spring begins (Northern)	21	22	23	24	25 Good Friday	26



Jessie Strecker



March	March ~ April 2016 ~ May ►								
Sun	Mon	Tue	Wed	Thu	Fri	Sat			
					1	2			
3	4	5	6	<b>7</b> World Health Day	8	9			
10	11	12	13	14	<b>15</b> Tax Day (Taxes Due)	16			
17	18	19	20	21	<b>22</b> Earth Day	23			
24	25	26	<b>27</b> Administrative Professionals' Day	28	<b>29</b> Arbor Day	30			

Hannah Ysseldyke Mukwonago/Kettle Moraine, WI Coach: Margie Canfield





Elise Rice Mukwonago/Kettle Moraine, WI Coach: Margie Canfield

✓ <u>April</u>			~ May 201	6 ~		<u>June</u> ►
Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5 Cinco De Mayo	6	7
8 Mother's Day	9	10	11	12	13	14
15	16	17	18	19	20	21 Armed Forces Day
22	23	24	25	26	27	28
29	30 Memorial Day	31	Notes:			



Canton High School, Michigan Coach: John Cunningham

Sun	Mon	Tue	Wed	Thu	Fri	Sat			
			1	2	3	4			
5	6	7	8	9	10	11			
12	13	<b>14</b> Flag Day	15	16	17	18			
<b>19</b> Father's Day	20 Summer Solstice	21	22	23	24	25			
26	27	28	29	30	Notes:				

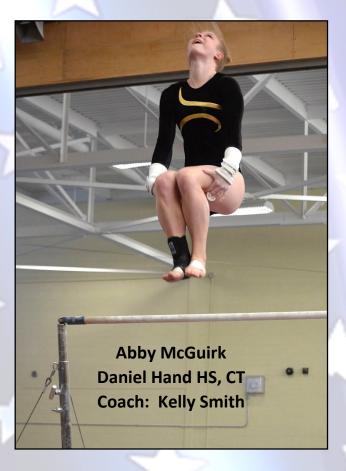


Olivia Rosenow Roseville Area HS-MN Coach: Mike Flatten



Lauren Reese Mukwonago/Kettle Moraine-Wisconsin Coach: Margie Canfield

June ~ July 2016 ~ August ►								
Sun	Mon	Tue	Wed	Thu	Fri	Sat		
					1 Canada Day	2		
3	4 Independence Day	5	6	7	8	9		
10	11	12	13	14	15	16		
17	18	19	20	21	22	23		
24	25	26	27	28	29	30		
31	Notes:							





Erin Zajc Mukwonago/Kettle Moraine, WI Coach: Margie Canfield

l July		^	- August 201	6 ~		September ►
Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
<b>7</b> International Friendship Day	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31	Notes:		•

Brooke Kangas Mukwonago/Kettle Moraine, WI Coach: Margie Canfield



Isis Mueller Roseville Area HS-MN Coach: Mike Flatten



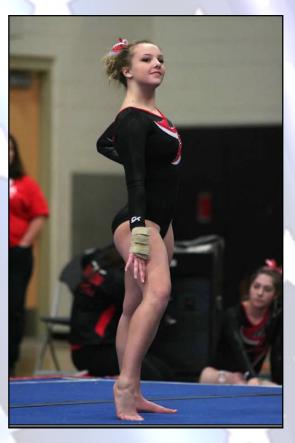
◄ August		~ S	eptember 2	016 ~		October <b>&gt;</b>
Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
4	5 Labor Day	6	7	8	9	10
<b>11</b> Patriot Day	12	13	14	15	16	17
18	19	20	21	22 Fall begins (Northern H.)	23	24
25	26	27	28	29	30	Notes:





Hailey Hodgson Canton HS-MI Coach: John Cunningham

◄ September	September ~ October 2016 ~ November ►								
Sun	Mon	Tue	Wed	Thu	Fri	Sat			
						1			
2	3	4	5	6	7	8			
9	10 Columbus Day	11	12	13	14	15			
16	17	18	19	20	21	22			
23	24 United Nations Day		26	27	28	29			
30	31 Halloween	Notes:							



Allison Kunz Canton HS-MI Coach: John Cunningham



Maddy Krumenacher Mukwonago/Kettle Moraine, WI Coach: Margie Canfield

<ul> <li>✓ <u>October</u></li> </ul>		~	November 2	016 ~		<u>December</u> ►
Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
<b>6</b> Daylight Saving Time Ends	7	8 Election Day	9	10	11 Veterans' Day	12
13	14	15	16	<b>17</b> Great American Smokeout	18	19
20	21	22	23	24 Thanksgiving Day	25	26
27	28	29	30	Notes:		,



Nicole Confare



**Brooke Kangas** 

Mukwonago/Kettle Moraine HS, WI Coach: Margie Canfield

◄ <u>November</u>	A November     A December 2016 ~ January     A     January     A								
Sun	Mon	Tue	Wed	Thu	Fri	Sat			
				1 World AIDS Day	2	3			
4	5	6	7	8	9	<b>10</b> Human Rights Day			
11	12	13	14	15	16	17			
18	19	20	21 Winter Solstice (Northern)	22	23	24			
25 Christmas	26	27	28	29	30	31			



# MEMBERSHIP APPLICATION

Name:	Year (season) Applying For			
Preferred Address:				
City, ST, ZIP				
Preferred Phone: ()	Fax: (	)		
**E-Mail:		_ PLEASE write clearly, e-mail address is important as we will		
try to send out most communications through e	e-mail.			
High School Name:				
Are you: Head Coach: Assistant Coach: _	USA J	udge: NFHS Judge: Other:		
Membership Type Applying For:				

<u>Active Member</u>: Any adult who is currently coaching or judging women's high school gymnastics or has had a minimum of 5 years coaching/judging at the women's high school level is eligible to become a voting member.

**<u>Professional Member</u>**: Other professionals, who have a strong commitment, participate in and have an involvement in High School gymnastics may become professional members. This may include judges, certified officials, technicians and other individuals who have an area of expertise and are actively involved in High School gymnastics programs and activities. Votes for these members will be counted individually at ½ value of a vote of a Active Member.

<u>Associate Member</u>: Any person of integrity, working with or interested in gymnastics shall be eligible to become and associate member. Associate members shall have no voting rights in the corporation.

Send completed form and your \$25.00 membership fee to:(\$20.00 membership through your state association of 15 or more members submitted at once)

Patrick Simon	
NHSGA Sec/Treasurer	Payment method:
105 Wilcox Road	
Milford, CT 06460	Check #:

### Membership is effective from August 1<sup>st</sup> – July 31<sup>st</sup>.

Membership enables a high school coach to:

-Vote in the NHSGA elections (membership application must be postmarked before April 1<sup>st</sup>) in order to participate in the election); submit their athletes and teams for All-American Honor and National Rankings; have a gymnast compete at the NHSGA Senior Showcase; coach a gymnast at the NHSGA Senior Showcase Invitational; receive periodic newsletters; attend and have a voice at the annual NHSGA meeting, receive yearly All American Calendars and Yearbooks (via pdf on line).

Remember to write in the type of membership you are applying for.

 Have you ever been denied membership from USA gymnastics? Yes \_\_\_\_\_ No \_\_\_\_\_

 Have you ever been convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_



NATIONAL HIGH SCHOOL GYMNASTICS ASSOCIATION

# NHSGA All American Women's Teams

To nominate a team for All American honors, follow these procedures:

- A. The coach must be a current member of the NHSGA.
- B. The Team Score is based on the accumulation of **four** (new this year) raw scores on each event.
- C. These scores are to be an average of three competitions, one of which must be in a championship competition (i.e. 5 or more team invitational, League, Regional or State meet series). Exceptions can be made by the NHSGA president.
- D. The score sheets must clearly show the competition involved and must be signed by the head judge, coach and athletic director. (Elite level only)
- E. The use of the All American Averaging Scoring form must be used.
- A typed or printed list of the team members' names, the name of your principal and your schools address, must be submitted.
- A \$5.00 application fee plus \$2.00 per certificate is required covering team members, coaching staff, managers and any other special individuals like your trainer or athletic director.

Non-returnable score sheets or copies of the original score sheets must be postmarked by **JUNE 1**<sup>st</sup> to be accepted. Mail the Women's Team nomination to Pat Simon 105 Wilcox Road Milford, CT 06460

Qualifying Scores: Women's Scores

Standard/Elite

### 130.00/145.65

Honorable Mention: If your women's team averaged between **126.00-129.99** your team is eligible for 2 honorable mention certificates (one for the coach and one for the school). A fee of \$10.00 is required. Send your requests to:

## Pat Simon 105 Wilcox Road Milford, CT 06460

Checks payable to: NHSGA

### Late fee of \$10 per team if application is received after June 1<sup>st</sup>. NO APPLICATIONS ACCEPTED AFTER JULY 1<sup>ST</sup>

Please limit your scores to two decimal places only, round up.



# NHSGA All American Individual Gymnasts (Women)

To nominate a gymnast for All American honors please observe the following procedures:

A. The coach must be a member of the NHSGA

B. The qualifying score must be an average based upon five (5) competitions, two of which must be from tournament of five or more teams and /or from a league, regional, sectional or state tournament. (Exceptions can be made by the NSHGA president)

C. For <u>Elite</u> gymnasts the non-returnable score sheets or copies of the original must clearly indicate: 1. The gymnasts full name. 2. The scores awarded. 3. The signature of the head judge, coach and your athletic director.

D. The use of All American Averaging Scoring Form for each nominated gymnast **MUST** be used and contain the following 1.The age of the gymnast. 2. The class in school of the gymnast. 3. The All American average you computed with the meet sites and dates. 4. What college the gymnast plans to attend after graduation. (if known for seniors only)

E. A \$5.00 application fee per gymnast plus \$1.00 per event must be included. Checks payable to: **NHSGA LATE FEE OF \$5 PER GYMNAST REQUIRED IF APPLICATION IS RECEIVED AFTER JUNE 1<sup>ST</sup>. NO APPLICATIONS ACCEPTED AFTER JULY 1<sup>ST</sup>!** 

The non-returnable scores sheets or copies of the original score sheets must be **post marked prior to JUNE 1**<sup>st</sup>. Mail Women's All American Gymnast Nominations to to **Pat Simon 105 Wilcox Road Milford, CT 06460** 

Qualifying scores: Women's

	Standard/Elite
All Around	8.40/9.30(37.2)
Vaulting	8.70/9.40
Uneven Bars	8.50/9.40
Balance Beam	8.50/9.35
Floor Exercise	8.80/9.5

Honorable Mention: Even if your team did have an All American individual, a coach can request honorable mention status for one or two of their most deserving gymnasts. No scores need to be submitted. Your recommendation only is needed. A fee of \$10.00 is required for either one or two certificates (no duplicates will be sent).

Send requests to

<u>Pat Simon</u> 105 Wilcox Road Milford, CT 06460

Please make checks payable to: NHSGA- LATE FEE OF \$5 PER GYMNAST REQUIRED IF APPLICATION IS RECEIVED AFTER JUNE 1<sup>st</sup>. NO APPLICATIONS ACCEPTED AFTER JULY 1<sup>st</sup>!



# NATIONAL HIGH SCHOOL GYMNASTICS ASSOCIATION

# **NHSGA All American Women's Teams**

Average 4 scores this year

#### AVERAGING SCORE FORM

	Year Applying For:
Name of High School	
Address	
City, ST, Zip _	
Head Coach's Name _	
Assistant Coach's Name _	
Principal's Name	
E-mail Address	Please write neatly

Note: The copies of the score sheets submitted must be signed by the Head Judge, the Coach and the Athletic Director to be considered valid.

Only two decimal places please, round up after that.

AVERAGE SCORES EQU	ALS:		
	Meet #1	Meet #2	Meet #3
Opponent &			
Date of Meet			
Meet Score			
Comments and addition	nal information:		

A \$5.00 application fee plus \$2.00 per certificate is required covering team members, coaching staff, managers and any other special individuals like your trainer or athletic director. Please include a list of certificate winners. **Make checks payable to NHSGA LATE FEE OF \$10 PER TEAM IS REQUIRED IF APPLICATION IS RECEIVED AFTER JUNE 1<sup>ST</sup>. NO APPLICATIONS ACCEPTED AFTER JULY 1<sup>ST</sup>!** 

\*\*Send Women's to:

<u>Pat Simon</u> 105 Wilcox Road Milford, CT 06460

Make checks payable to NHSGA



NATIONAL HIGH SCHOOL GYMNASTICS ASSOCIATION

NHSGA All American Women Season/Year Applying For:					
	ALL AME	ERICAN A	AVERAGING SCORE FORM		
Gymnasts Name:					
Year in School: 9 10 11 12					
Name of High School					
Address, City, State, Zip					
			Preferred		
Head Coach's Name			Phone Number:		
NSHGA Member Circle One	Yes	No			
(If NO: A membership form MUST a	ccompar	ny this fo	orm)		
E-mail:			_ Please write legibly		

NOTE: To be considered for ELITE ALL AMERICAN, copies of score sheets must be submitted and must be signed by the Head Judge, the Coach and the Athletic Director to be considered valid.

### Only two decimal places please, round up after that.

Event	Date and Score #1	Date and Score #2	Date and Score #3	Date and Score #4	Date and Score #5	Average
Vaulting 8.70/ 9.40						
Uneven Bars 8.50/ 9.40						
Balance Beam 8.50/ 9.35						
Floor Exercise 8.80/ 9.50						
All Around 8.40/9.30 37.2						

Send Form and Check to: Make checks payable to NHSGA to Pat Simon 105 Wilcox Road

Milford, CT 06460

\*\*\*A \$5.00 application fee per gymnast plus \$1.00 per event must be included. LATE FEE OF \$5 PER GYMNAST REQUIRED IF APPLICATION IS RECEIVED AFTER JUNE 1<sup>ST</sup>. NO APPLICATIONS ACCEPTED AFTER JULY 1<sup>ST</sup>!



# **NHSGA All American Varsity Men's Teams**

To nominate a team for All American honors, follow these procedures:

- A. The coach must be a current member of the NHSGA.
- B. The **Varsity** Team Score is based on the accumulation of <u>three (3)</u> raw scores on each event.
- C. These scores are to be an average of three competitions, one of which must be in a championship competition (i.e. 5 or more team invitational, League, Regional or State meet series). Exceptions can be made by the NHSGA president.
- D. The score sheets must clearly show the competition involved and must be signed by the head judge, coach and athletic director. (Elite level only)
- E. The use of the All American Averaging Scoring form must be used.
- F. A typed or printed list of the team members' names, the name of your principal and your schools address, must be submitted.
- G. A \$5.00 application fee plus \$2.00 per certificate is required covering team members, coaching staff, managers and any other special individuals like your trainer or athletic director.
   Non-returnable score sheets or copies of the original score sheets must be postmarked by JUNE 1<sup>st</sup> (of gymnastics)

year) to be accepted. Mail the Team nomination to

## <u>Pat Simon</u>

## 105 Wilcox Road Milford, CT 06460

Qualifying Scores: Men's Scores

s Scores

Standard/Elite

## <mark>140.0 / 155.0</mark>

Honorable Mention: If your Varsity boy's team averaged between **136.0-139.99** your team is eligible for 2 honorable mention certificates (one for the coach and one for the school). A fee of \$10.00 is required. Send your requests to: **Pat Simon 105 Wilcox Road Milford, CT 06460** 

### Checks payable to: NHSGA

Please limit your scores to two decimal places only, round up.

Late fee of \$10 per team if application is received after June 1<sup>st</sup>. NO APPLICATIONS ACCEPTED AFTER JULY 1<sup>ST</sup>

Applications must be postmarked by JUNE 1





# **NHSGA All American Varsity Men's Teams**

Gymnastics Year: 20\_\_\_\_-20\_\_\_\_

**AVERAGING SCORE FORM** 

Name of High School	
Address	
City, ST, Zip	
Head Coach's Name	
Assistant Coach's Name	
Principal's Name	
E-mail Address	Please write neatly

Note: The copies of the elite score sheets submitted must be signed by the Head Judge, the Coach and the Athletic Director to be considered valid.

<mark>Only t</mark>	wo decimal places pl	ease, round up after that.		
AVERA	GE SCORES EQUALS	:		
	Meet #1	Meet #2	Meet #3	Meet #4
Opponent &				
Date of Meet				
Meet Score				
Comments and	d additional information	ion:		

A \$5.00 application fee plus \$2.00 per certificate is required covering team members, coaching staff, managers and any other special individuals like your trainer or athletic director. Please include a list of certificate winners. Make checks payable to NHSGA

\*\*Send to:

<u>Pat Simon</u>

105 Wilcox Road Milford, CT 06460 If your gymnast/team qualifies for the elite status, please send us an action photo of her/him. We are trying to bring the Yearbook back with photos. THANKS!

Applications must be postmarked by JUNE 1

Late fee of \$10 per team if application is received after June 1<sup>st</sup>. NO APPLICATIONS ACCEPTED AFTER JULY 1<sup>ST</sup>



# NHSGA All American Individual Men's Gymnasts (Varsity Only)

To nominate a Varsity gymnast for All American honors please observe the following procedures:

- A. The coach must be a member of the NHSGA
- B. The qualifying score must be an average based upon five (5) competitions, two of which must be from tournament of five or more teams and /or from a league, regional, sectional or state tournament. (Exceptions can be made by the NSHGA president)
- C. For <u>Elite</u> gymnasts the non-returnable score sheets or copies of the original must clearly indicate: 1. The gymnasts full name. 2. The scores awarded. 3. The signature of the head judge, coach and your athletic director.
- D. The use of All American Averaging Scoring Form for each nominated gymnast **MUST** be used and contain the following 1. The age of the gymnast. 2. The class in school of the gymnast. 3. The All American average you computed with the meet sites and dates. 4. What college the gymnast plans to attend after graduation. (if known for seniors only)

E. A \$5.00 application fee per gymnast plus \$1.00 per event must be included. Checks payable to: NHSGA The non-returnable scores sheets or copies of the original score sheets must be post marked prior to JUNE 1<sup>st</sup>. Mail Women's All American Gymnast Nominations to Pat Simon 105 Wilcox Road Milford, CT 06460

Qualifying scores:	Men's Scores

Standard/EliteFloor Exercise8.5 / 8.9Pommel Horse7.9 / 9.0Still Rings8.3 / 9.1Parallel Bars8.2 / 9.1Vault8.5 / 9.2High Bar8.2 / 9.0All Around46.2 / 53.4

If your gymnast/team qualifies for the elite status, please send us an action photo of her. We are trying to bring the Yearbook back with photos. THANKS!

Honorable Mention: Even if your team did have an All American individual, a coach can request honorable mention status for one or two of their most deserving gymnasts. No scores need to be submitted. Your recommendation only is needed. A fee of \$10.00 is required for either one or two certificates (no duplicates will be sent). Send

## requests to <u>Pat Simon</u> 105 Wilcox Road Milford, CT 06460

Please make checks payable to: NHSGA

Late fee of \$10 per team if application is received after June 1st. NO APPLICATIONS ACCEPTED AFTER JULY 1ST

Applications must be postmarked by JUNE 1





NHSGA All American Men	Season/Year Applying For:			
	ALL AMERICAN AVERAGI	ING SCORE FORM		
Gymnasts Name:		Year in School:	9 10	11 12
Name of High School				-
Address, City, State, Zip				
		referred		
Head Coach's Name	Pho	one Number:		
NSHGA Member Circle One	Yes No			

## (If NO: A membership form MUST accompany this form)

E-mail: \_\_\_\_\_ Please write legibly

NOTE: To be considered for ELITE ALL AMERICAN, copies of score sheets must be submitted and must be signed by the Head Judge, the Coach and the Athletic Director to be considered valid.

Only two decimal places please, round up after that.

Event	Date and Score #1	Date and Score #2	Date and Score #3	Date and Score #4	Date and Score #5	Average
Floor 8.5 / 8.9						
Pommels 7.9 / 9.0						
Still Rings 8.3 / 9.1						
Parallel Bars 8.2 / 9.1						
Vault 8.5 / 9.2						
High Bar 8.2 / 9.0						
All Around 46.2 / 53.4						

Send Form and Check to: Make checks payable to NHSGA to Pat Simon 105 Wilcox Road

### Milford, CT 06460

\*\*\*A \$5.00 application fee per gymnast plus \$1.00 per event must be included. LATE FEE OF \$5 PER GYMNAST REQUIRED IF APPLICATION IS RECEIVED AFTER JUNE 1<sup>ST</sup>. NO APPLICATIONS ACCEPTED AFTER JULY 1<sup>ST</sup>!