



USA GYMNASTICS COMPETITION ENTRY FORM

USA GYMNASTICS.

Name of Meet: _____
 Hosted by: _____
 Host Address: _____

Club: _____ Contact: _____
 Address: _____ Phone: _____
 City: _____ State: _____ Zip Code: _____ Fax: _____
 USAG Club #: _____ Email Address: _____

	Athlete First Name	Last Name	Level	USA Gym Athlete Number	DOB	Age	Citizen (Y/N)	Entry Fee
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								

	Coach First Name	Last Name	USAG #	Safety Exp	Background	U100 (Y/N)
1						
2						
3						
4						
5						

COMPETITION LEVELS	NUMBER OF ATHLETES PER LEVEL	ENTRY FEE	TOTAL	TEAM ENTRY FEE	TOTAL DUE PER LEVEL
LEVEL 1	x		=\$ +		\$
LEVEL 2	x		=\$ +		\$
LEVEL 3	x		=\$ +		\$
LEVEL 4	x		=\$ +		\$
LEVEL 5	x		=\$ +		\$
LEVEL 6	x		=\$ +		\$
LEVEL 7	x		=\$ +		\$
LEVEL 8	x		=\$ +		\$
LEVEL 9	x		=\$ +		\$
LEVEL 10	x		=\$ +		\$
GRAND TOTALS					\$