

THE TEXAS SHOOTOUT / JAN. 8-10, 2021
MEET ENTRY FORM--DUE NOVEMBER 15, 2020

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'vd:	
Check #:	
Amount:	\$
Short/Over:	
Entered:	Email Conf:

Level Xcel:	# X \$85 Entry Fee	\$
Level 1-5:	# X \$60 Entry Fee	\$
Level 6-10:	# X \$110 Entry Fee	\$
# of Team Entries @ \$50 each =		\$
Late Fee-after 11/15/20 # X \$25 per entry		\$
Check Payable to Texas Shootout:		
Mail to P O Box 548, Buda, TX 78610-0548		
		\$

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: The Texas Shootout, P O Box 548, Buda, Texas 78610-0548