

State Championship Entry Form Women's Artistic Gymnastics



Club Name _____ **Club #:** _____ (required)

Mailing Address _____ **City** _____ **Zip** _____

Phone: _____ **Fax:** _____ **Email:** _____

Coach's Name(Print) _____ **USAG #** _____ **Member Exp** _____ **Bkgrnd** _____ **Safety Exp.** _____

**COPY THIS
FORM AS
NEEDED**

List each coach that will attend – each will be verified
Please use one (1) form per level ~ Complete all columns

CIRCLE **ONE** LEVEL 1 2 3 4 5 11/12/2020

ATHLETE NAME	USAG #	BIRTHDATE	HIGH SCORE	MEET NAME SCORE ACHIEVED
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				

Total Number of Entries _____ X \$ _____ = \$ _____

Team Fee - **\$50.00** (if entering team competition) \$ _____

TOTAL \$ _____ Ck # _____

Individual Entry Fees
\$75.00 All Levels

As per USA Gymnastics, all coaches and gymnasts must be entered through the Meet Reservation system.
Please check if you have completed your Meet Reservation.

NO refunds of entry fees even if clubs enter an unqualified athlete - refunds will only be given for injuries with medical verification. Clubs that need the final 2 weekends before the state meet to qualify an athlete will have the choice to enter the athlete by deadline date with no refund if they do not qualify – or wait and if the athlete qualifies then enter the athlete late paying the entry fee plus the \$50 late fee.