September 30 – October 1, 2017

USA SANCTIONED Meet Entry Form

Please print clearly

Team Name _____ Club ID #_____

Address_____

City/State_____ Zip Code_____

Gym Phone_____ Gym Fax_____

Email address to receive meet information_____

Coaches Attending:

Name	USA #	Mem Exp Date	Safety Exp Date	Background Exp Date

Please use one form per Level

Circle One **Level** 1 2 3 4 5 Xcel - Bronze Silver Gold Platinum Diamond

Team Yes No **Charity**_____

Please print clearly

Athlete Name	Level	Date of Birth	Age	USA #	US Citizen

Entry Fee $80/gymnast Number of gymnasts_____X $80 = _____

Team Entry $50/Team/Level

Total: _____gymnasts +_____team = _____

Make checks payable to Lightning City Gymnastics

Entry Deadline August 29, 2017

September 30 – October 1, 2017

AAU SANCTIONED Meet Entry Form

Please print clearly

Team Name _____ Club ID #_____

Address_____

City/State_____ Zip Code_____

Gym Phone_____ Gym Fax_____

Email address to receive meet information_____

Coaches Attending:

Name	AAU #	Mem Exp Date	Safety Exp Date	Background Exp Date

Please use one form per Level

Circle One **Level** 1 2 3 4 5 Xcel - Bronze Silver Gold Platinum Diamond

Team Yes No **Charity**_____

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