

**Level 9, 10 & Elite**  
**2004 Region 8 Training Camp**  
**OCTOBER 1-3, 2004**

***Auburn Gymnastics Academy - Auburn, Alabama***

**CAMP IS FULL FOR ATHLETES**  
**COACHES AND JUDGES MAY STILL REGISTER**  
***Camp open to all USAG Professional Members.***

**Tentative Schedule for Camp:**

FRIDAY: 3:00 P.M. - 8:30 P.M.  
SATURDAY: 10:30 A.M. - 6:00 P.M.  
SUNDAY: 9:30 A.M. - 1:00 P.M.

**COACHES AND JUDGES REGISTERED FOR TRAINING CAMP MAY  
ATTEND ALL TRAINING CAMP AND NAWGJ SESSIONS AND LECTURES.**

**NAWGJ Symposium Times:**

SATURDAY - AT GYM:	8:15 - 9:20A.M.	LECTURE 1
	9:25 - 10:30A.M.	LECTURE 2
SUNDAY - AT HOTEL:	8:45 - 9:45A.M.	LECTURE 3
	10:00 - 11:00A.M.	LECTURE 4
	11:15 - 12:15P.M.	LECTURE 5

**HOTEL:** Auburn University Hotel & Dixon Conference Center  
241 South College Street  
**334-821-8200 Phone**  
334-826-8755 Fax  
**\$95.00** - Ask for Region 8 Gymnastics rate

**FEES:** \$50 per coach or judge (discounts if bringing athletes)

**PROVIDE EMAIL INFORMATION FOR CONFIRMATION OF ENTRY AND FINAL SCHEDULE**

**VOLUNTEERS:**

No fee is required to attend camp and you will be eligible for apparel if your athlete qualifies to JO Nationals!

**MAIL ALL FORMS WITH FEES TO: Debby Kornegay**  
394 Stonebridge Road, Birmingham, AL 35210

# REGION 8 TRAINING CAMP 2004

## CLINICIAN APPLICATION

If you will have coaches at the training camp and would like to offer their services to assist as clinicians, please fill in the form below. **THIS IS A VOLUNTARY POSITION.** Clubs will be notified in advance if services will be required. Thank you for your offer!

NAME OF GYM: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DAY PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

NIGHT PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_ @ \_\_\_\_\_

If you would like confirmation of receipt of entry and acceptance to Training Camp please provide email address

**I give my permission for the above information to be used in the Region 8 Address book.**

\_\_\_\_\_  
Signature

**TRAINING CAMP YOUR COACHES WILL BE ATTENDING AND ARE ABLE TO WORK:**

**LEVEL 9, 10 & ELITE**  
**October 1-3, 2004**  
Auburn, Alabama  
**Auburn Gymnastics**

NAME OF COACHES ATTENDING CAMP FROM YOUR GYM:

1. \_\_\_\_\_ USAG# \_\_\_\_\_ 2. \_\_\_\_\_ USAG# \_\_\_\_\_

DID YOU HAVE GYMNASTS AT LEVEL 10 OR 9 NATIONALS IN 2004?  YES  NO

DID YOU HAVE GYMNASTS AT LEVEL 10 OR 9 REGIONALS IN 2003?  YES  NO

IS THERE AN EVENT(S) THAT THE COACHES WOULD **NOT** WANT TO BE ASSIGNED TO?

1. \_\_\_\_\_ 2. \_\_\_\_\_

**PLEASE SEND THIS FORM IN BY: September 15 (Levels 9, 10 & Elite)**

**TO:** Debby Kornegay, 394 Stonebridge Road, Birmingham, AL 35210 (205) 951-0184

**Thank you for offering to help! Your assistance will be greatly appreciated!** You will be contacted with your event and day approximately 30-45 days prior to the Camp date. Everyone who volunteers that had an athlete at Level 9 Regionals or above will be assigned to work! All proceeds from these events will go to the 2005 Region 8 Apparel Fund.

**Support your Region - Support your athletes - Volunteer to work today!**

*Clubs that have coaches work the camps will be eligible to receive apparel if they have athletes qualify to Nationals in 2005. Clubs who do not work and contribute at least \$1000.00 will also be eligible to receive apparel if athletes qualify to Nationals!*

# TRAINING CAMP REGISTRATION FORM

## FOR COACHES & JUDGES WITHOUT PARTICIPATING GYMNASTS

Judges registered for the October Camp are automatically registered for NAWGJ symposium.

NAME \_\_\_\_\_  COACH  JUDGE \_\_\_\_\_ RATING \_\_\_\_\_  
USAG# \_\_\_\_\_ EXP DATE \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
DAY PHONE \_\_\_\_\_ FAX \_\_\_\_\_  
NIGHT PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_ @ \_\_\_\_\_

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\_\_\_\_\_  
Signature

**COST: \$50.00**

**Make checks payable to REGION 8 USA GYMNASTICS**

**LEVEL 9, 10 & ELITE CAMP** (Auburn, AL [10/1-3/04]) **DEADLINE 9/15/04 - FIRST COME, FIRST SERVE**



Debby Kornegay, 394 Stonebridge Road, Birmingham, AL 35210 (205) 951-0184

# TRAINING CAMP REGISTRATION FORM

## FOR VOLUNTEER JUDGES

NAME \_\_\_\_\_ RATING \_\_\_\_\_  
USAG# \_\_\_\_\_ EXP DATE \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
DAY PHONE \_\_\_\_\_ FAX \_\_\_\_\_  
NIGHT PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_ @ \_\_\_\_\_

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\_\_\_\_\_  
Signature

You will be actively working on the floor. Please check below any event(s) that the judge would **NOT** want to be assigned to?  VAULT  BARS  BEAM  FLOOR

**COST: FREE - If assigned to work camp**

**LEVEL 9, 10 & ELITE CAMP** (Auburn, AL [10/1-3/04]) **DEADLINE 9/15/04 - FIRST COME, FIRST SERVE**



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