

ELITE COMPETITION ENTRY FORM

6



REGION 8 ELITE QUALIFIER
June 25-26, 2005
The Gym Company - Mooresville, NC
FEE: \$75.00 Compulsory OR Optional
\$125.00 Compulsory AND Optional
Deadline: May 20, 2005
\$25 late fee per gymnast



Team Name: _____ Date: _____
 Club USAG #: _____ Phone: _____
 Team Address: _____ Fax #: _____
 City: _____ State: _____ Zip: _____
 1. Coach _____ USAG # _____ Exp. Date _____ Safety Exp. Date _____
 2. Coach _____ USAG # _____ Exp. Date _____ Safety Exp. Date _____

Competitor Name	Athlete Registration #	COMP.	OPT.	Date of Birth
1)				
2)				
3)				
4)				
5)				
6)				
7)				
8)				
9)				
10)				

Number of GYMNASTS for Competition

Optional **OR** Compulsory _____ x \$75.00 = _____

Optional **AND** Compulsory _____ x \$125.00 = _____

Late fee per gymnast _____ x \$25.00 = _____

TOTAL AMOUNT \$ _____

MAKE CHECK PAYABLE TO REGION 8 USAG. ONE CHECK PER CLUB. NO PERSONAL CHECKS.

MAIL ENTRY FORM

WITH CHECK TO: Deb Kornegay • 394 Stonebridge Road • Birmingham, AL 35210

MAIL COPY OF FORM TO: Toni Rand • 6805 Lyons Technology Circle, Coconut Creek, FL 33073

OR FAX TO (954) 755-1750