|  |  |  |
| --- | --- | --- |
| Club Name: |  | USAG Club #: |
| Contact: |  | Phone #: |
| Address: |  | Gym Email: |
|  |  | Contact Email: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| COACH  First Last | | USAG# | # Exp Date  (mm/dd/yy) | SAFTEY Exp  (mm/dd/yy) | BKGR Exp  (mm/dd/yyyy) |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Competitor Name  First Last | | USAG# | LEVEL  (USAG 1-5 and Xcel  Levels 6-10) | DATE OF BIRTH  (mm/dd/yyyy) | CITIZEN  Y/N | Leo  Size |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| LEVEL | NUMBER | FEE | TOTAL |
| Levels 1-5, Xcel Bronze and Silver  Levels 6-10, Xcel Gold Platinum and Diamond |  | x $90.00  x $115.00 |  |
| TEAM ENTRY: |  | x $60.00 |  |
| LATE FEE: |  | x $10.00 |  |
| TOTAL AMOUNT PAYABLE TO GYMNASTICS ACADEMY OF ATLANTA (GAA):  **Please Email Entry Forms to keina@gymnasticsacademyofatlanta.com**  **Mail Payment to Address on Top of Form** | | |  |
|  |