

HVGC 2011 Fall Spectacular
Woman's Level 3-10 and Pre-Ops
November 12th and 13th
Entry Deadline : October 14th, 2011

Team Name _____ Club # _____

Team Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Coach _____ USAG# _____ Safety Cert. Exp. _____

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*** PLEASE USE ONE FORM PER LEVEL ---- COPY AS NEEDED*

GYMNAST NAME	USAG#	LEVEL	AGE	DATE OF BIRTH	T-SHIRT SIZE
					ADULT S/ M/L YOUTH M or L
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

GYMNAST ENTRY FEES: \$60.00 per gymnast - \$45.00 per team

TOTAL ENTRIES LEVEL 4 – 10 _____ @ \$60.00 = _____
 Total \$ _____

MAKE CHECKS PAYABLE TO: HVG BOOSTERS

MAIL TO: Hocking Valley Youth Sports Center

Attn: Bob Bennett
810 Slocum Street
Lancaster, Ohio 43130