15TH ANNUAL BARRON GYMNASTICS INVITATIONAL
DECEMBER 2, 3 & 4, 2011
MEET ENTRY FORM

TEAM NAME: _____ USA CLUB # _____

E-MAIL ADDRESS: _____ PH #_____ FAX #_____

TEAM ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMERGENCY PH #: _____ COACHES CELL #: _____

COACH ATTENDING:_____ USA#: _____ SAFETY CERT. EXP._____

COACH ATTENDING:_____ USA#: _____ SAFETY CERT. EXP._____

COACH ATTENDING:_____ USA#: _____ SAFETY CERT. EXP._____

PLEASE ENTER GYMNAST IN ORDER OF COMPETITIVE AGE BEGINNING WITH THE YOUNGEST FIRST.
PLEASE PRINT OR TYPE AND FILL IN ALL INFORMATION. THANK YOU.

COMPETITOR NAME (Correct Spelling Is Needed)	LEVEL	AGE	DATE OF BIRTH	USA #
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				

Entry Fee Totals: _____ Level 4 Gymnast @ $55.00 each = _____ Sub-Total

Entry Fee Totals: _____ Levels 5 & 6 Gymnast @ $65.00 each = _____ Sub-Total

Entry Fee Totals: _____ Excel, Level 7, 8, 9 & 10 Gymnast @ $75.00 each = _____ Sub-Total

Team Entries – $38.00 each Level 4 ___ Level 5 ___ Level 6 ___ Level 7 ___

Level 8 ___ Level 9 ___ Level 10 ___ Excel ___ = _____ Sub-Total

= _____ Total

RETURN TO: Barron Gymnastics • 5411 Jedmed Ct. • St. Louis, MO 63129 • (314) 892-6909

MAKE CHECKS PAYABLE TO: Barron Gymnastics POST MARKED DEADLINE: October 1, 2011