

 Level 8-10 **Regionals 2020** Commemorative Leotard

To commemorate your achievement, GK has designed this special leotard. The leotard is sublimated on our super soft subfuse material with scenes from every State in Region 1.

* **Pre-Orders received by March 24th = $49.00 tax included.**
* **Order received after March 24th = $49.00 (inc. tax) + $6.00 shipping = $55.00**

**All pre-orders will be available for pick-up at the Level 8-10 Regional Meet. Any orders received after March 24th will be shipped directly to you 4-6 weeks after the State meet.**

To order please use one of the following methods:

1. Email-Please return this form to: Marygrace Gavino at gkmgavino@gmail.com

2. Venmo- @GKBayArea\_ Please include gym name, contact info and size in comments.

3. Phone orders (925) 808-8778

Regional leotards cannot be returned or exchanged….all sales are final. \*please note pilling may occur on sublimation fabric. No returns will be accepted for pilling.

4. Mail form and check payable to GK Bay Area

GK Bay Area

2982 W. Castle Pines Terrace

Dublin, Ca 94568

 **This is a Region 1 fundraiser. A portion of proceeds directly benefits all of Region 1 Gymnastics.**

- - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -- - - -- - - -- - -

**To order, please complete the following: Circle LEVEL- 8 9 10**

**Gym Club Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_\_\_**

**Athlete’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please circle your GK Elite Sportswear Size:

 CS CM CL AXS AS AM AL AXL

**Phone#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Payment Information:

Credit Card #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Exp:\_\_\_\_\_\_\_\_\_ Security code:\_\_\_\_\_\_\_ Zip code associated with card:\_\_\_\_\_\_\_\_\_\_

Account Holder Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_