Level 5 State Championships





ENTRY FORM

November 5-6, 2016

Fill out and send to: Oroville Gymnastics

Attn: Heidi Wensel

1875 Feather River Blvd, Oroville, CA 95965

Email: [heidiwensel@sbcglobal.net](mailto:heidiwensel@sbcglobal.net) or (530)354-6961

Information will be posted on our web site at [www.orovillegymnastics.com](http://www.orovillegymnastics.com).

**CLUB INFORMATION**

Club Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Club Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Fax:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_\_\_Zip Code:\_\_\_\_\_\_\_\_\_\_\_

Contact Person:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Contact Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact e-mail address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COACH INFORMATION**

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| **NAME** | **USAG NO.** | **USAG EXP** | **SAFETY EXP** | **BKGRND EXP** |
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**GYMNAST INFORMATION**

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| NAME | USAG# | DOB | T-SHIRT Y/N |
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Number of gymnasts:\_\_\_\_\_\_\_\_ Cost per gymnast: $85.00 with t-shirt coupon ($75 if no t-shirt coupon) Total:\_\_\_\_\_\_\_\_\_\_\_\_ Please make checks payable to *OGBC (Oroville Gymnastics Booster Club)*