



Injury Petition Form

Refer to the current Women's Rules & Policies, Chapter 6 for the Xcel Program and Chapter 8 for the Development Program, under Specific Meet Information

State Championships: send completed form to your State Administrative Committee Chairman

Regional Championships: send completed form to your Regional Technical Committee Chairman (or other designated person).

- *Note: Notify the RACC by the Monday following the State Meet of any athletes who intend to petition to Regionals.*

If this form is incomplete, it may NOT be accepted. It is the responsibility of the coach to provide all necessary information.

Deadline – 3 days following the last qualifying meet

Meet petitioning to: _____

Gymnast's Name: _____ USA Gym Number: _____

Birth Date: _____ Age: _____ Level: _____

Coach's Name: _____ Coach's Cell Phone #: _____

Coach's USA Gym Number: _____ Coach's E-mail: _____

Gym Name: _____ Gym Phone: _____

Gym Address: _____ City: _____ State: _____

1. Photocopy Results of a minimum of one Sanctioned Meet:

Meet: _____ Date of Competition: _____

Scores – Vault: _____ Bars: _____ Beam: _____ Floor: _____ AA: _____

2. Licensed Medical Professional's written verification of illness or injury and release to return to gymnastics activity. Please specify the DATE of return to gymnastics activity.