

COMPETITION REGISTRATION FORM

GYM NAME:	
ADDRESS: _	
_	
COACH(ES):	

Rising Stars

District Qualifier
Levels 1-5
September 16-17, 2023

PHONE:
E-MAIL:
COACH(ES):
USAG#(S):

	COMPETITOR	LEVEL	USAG#	DOB
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

ALL LEVELS GYMNASTS:	X \$75.00 = \$
# OF TEAMS :	X \$35.00 = \$

\$____TOTAL FEES