## **USAG Entry Form**

USAG Entry Form									Spring d			
Club	Name:											
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Club	Address: _			Ci	ty:		_Zip:_					
Club	Email:							_USAG C	:			
	Coaches Attending					USAG Pro #			Safety Exp.			
	1			ug	USAG F10 #				Safety Exp.			
	2											
	3											
	4											
CIRC	LE LEVEL	2	_			6				cel Silver		
		Exce	el Gold			num **** ***		8	9	10		
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Total	l Number o	f Entries	x \$		= \$		_ +	Tear	n Fee: \$			

\*\*CHECK MUST BE INCLUDED WITH ENTRY\*\* Please make all checks payable to Golden City Gymnastics.

Total Due: \$ \_\_\_\_\_

Check the meet information sheet for entry and team fee amounts.