



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

USAG Club #: \_\_\_\_\_

Club Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\*Make check payable to Orlando Gymnastics. Mail to: 11821 S. Orange Blossom Tr., Suite A, Orlando, FL 32837

	<u>COACHES ATTENDING</u>	<u>USAG#</u>	<u>Safety Exp. Date</u>	<u>Bkgd. Exp.</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

Use one form per level

CIRCLE LEVEL: 1 2 3 4 5 6 7 8 9 10 XCEL Level: \_\_\_\_\_

	<b>ATHLETE NAME</b>	<b>USAG #</b>	<b>BIRTHDATE</b>	<b>LEVEL</b>
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				

<b>Level</b>	<b># of athletes</b>			<b>team</b>	<b>total</b>
Levels 1-5, XBronze, XSilver, XGold	\$100	x	=	+ \$50	=
Levels 6-10, XPlatinum, XDiamond	\$120	x	=	+ \$50	=

**TOTAL AMOUNT DUE:**