

Hosted by Technique Gymn
 at Folsom High School
 Qualification is 32.00 AA
 at any meet in Region 1
www.techniquegym.com

Level 8-10 States

NorCal Gymnast Registration
 March 22-23, 2014

Competition order will be youngest to oldest (by level)

Mail form & fees to:
 P.J. Slater
 6545 Young Oak Court
 Orangevale, CA 95662
 (916) 692-2559 fax
 pipjlater@yahoo.com

Club Name: _____ Club #: _____ Phone: _____
 Club Address: _____ Fax: _____
 City: _____ St: _____ Zip: _____ Email: _____

X Comp. leo color(s): _____ Contact: _____ Contact Phone: _____

Coach: _____ Pro #: _____ Pro Exp: _____ Safety Exp: _____ Bkgr Exp: _____
 Coach: _____ Pro #: _____ Pro Exp: _____ Safety Exp: _____ Bkgr Exp: _____
 Coach: _____ Pro #: _____ Pro Exp: _____ Safety Exp: _____ Bkgr Exp: _____
 Coach: _____ Pro #: _____ Pro Exp: _____ Safety Exp: _____ Bkgr Exp: _____

*If you use your own form please make sure **ALL** information is supplied.*

Gymnast Name <small>Please print clearly</small>	Birthdate	Level	USAG #	T-shirt?	Grad Senior?
1.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
2.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
3.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
4.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
5.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
6.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
7.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
8.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
9.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
10.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
11.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
12.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
13.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
14.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
15.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
16.				<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N

Please make 1 club check payable to GAFO & mail to the above address (NOT to the gym).
 Registration & full payment must be postmarked **BY Monday, March 17, 2014.**

Refund deadline is Mon, March 17, 2014. \$25 late fee per gymnast for ANY entry not postmarked & fully paid by March 17.
 Check the website for updated meet info & details.

_____ Gymnasts @ \$110⁰⁰
 _____ Additional shirts for coaches @ \$10⁰⁰ Total Enclosed: \$ _____

Note: \$110 entry fee includes \$10 for t-shirt. Deduct \$10 if you do not want a shirt. The same shirt will be \$15 at the meet.

NorCal Graduating Senior Form.



Name of Gymnast _____

Parent(s) Name _____

Will the parents be attending this years State Meet (They will be presenting flowers to their daughter)? yes no .

If no, do you want Norcal to provide someone to present the flowers or do you want their coach?

Coach NorCal provide presenter

Competitive Level at this years State Meet _____ Number of years participating in gymnastics: _____

Gym Affiliation : _____

Gym Address : _____

Coach's Name : _____ Phone# : _____

Current High School Attending: _____

High School Address: _____ Graduation Date: _____

What college will she be attending next year _____

Has she received a scholarship yes no What will she be majoring in? _____

Outside activities _____

Fun Facts _____

Please include a head shot. **The head shot may not have a photographers name on the front or the back!** It is against copyright law to reproduce these pictures. If you don't have one without a photographer's name, we ask that you take one personally and include it. You may send pictures on CD if you would like. Mail with this form to the gym hosting your daughter's State Meet.

Level 7 State	Levels 8/9/10 State	Xcel State
Champion Gymnastics Academy Jennifer Krause 3 Atherton Island Stockton, CA 95204 Phone (209) 477-8978 Fax (209) 464-5393	Technique Gymnastics P. J. Slater 11345 Folsom Blvd. Rancho Cordova, CA 95742 Phone (916) 635-7900 Fax (916) 692-2559	Byers Gymnastics Center, Roseville Jennifer McFall PO Box 1011 Roseville, CA 95678 Phone (916) 335-6345 Fax (916) 781-3840