

# Technique Gymnastics

cordially invites you to compete in our 13<sup>th</sup> annual

## Flower Power Inv.

**When:** March 9-10, 2019 (Levels 2-8 & Xcel)

*Weekend before L8-10 State &  
3 weeks before L6-7 State*

**Where:** Technique Gymnastics  
Rancho Cordova, CA

**Levels:** 2-8 & Xcel Limited to 1<sup>st</sup> 700 entries

**Entry Fee:** \$100<sup>00</sup> Postmarked & fully paid by Fri, Feb 8  
NOTE – You must register through the USAG Reservation System and then mail completed form & fees. Incomplete registrations will be placed on the waiting list.

**Team Fee:** \$NONE Top 3 event scores per level per session

**Host Hotel:** See website for complete information

**Website:** [www.TechniqueGym.com](http://www.TechniqueGym.com)

**Deadline:** Friday, Feb 8 (refund deadline is 2/22/19)

- NO team fees!
- Age groups (lots of awards, 1/2 + 1 will place)
- Everyone will take home at least 1 medal
- Spectacular team awards per session
- Fabulous T-shirts
- All AAI equipment
- All electronic score flashing using ProScore™
- Computer generated score cards showing individual placement
- Professional photography available

1. Register all kids & coaches through the USAG Reservation System

2. Mail registration form with complete fees payable to GAFO to:

P.J. Slater (NOT to the gym)  
6545 Young Oak Court  
Orangevale, CA 95662  
email: [pjplater@yahoo.com](mailto:pjplater@yahoo.com)

Phone: (916) 337-8025 cell  
Fax: (916) 692-2559  
[www.TechniqueGym.com](http://www.TechniqueGym.com)

1. Register through the USAG website  
 2. Mail form & fees to  
**P.J. Slater**  
 6545 Young Oak Court  
 Orangevale, CA 95662  
 email: pipislater@yahoo.com

# Flower Power Inv.

March 9-10, 2019

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: \_\_\_\_\_

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

Gymnast Name	Birthdate	Level	USAG #	
<small>Please print clearly. Make sure spelling matches USAG.</small>		<small>2-8 &amp; Xcel</small>	<small>Must be current for 2018/19</small>	
1.				
2.				
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16.				

Please make checks payable to **GAFO**. Entry deadline is **Fri, Feb 8, 2019**.

Refund deadline is 2/22/19. Substitutions OK but NO REFUNDS for any reason after refund deadline.

\_\_\_\_\_ Gymnasts @ \$100<sup>00</sup> each \$ \_\_\_\_\_

**\$NO TEAM FEES** (3 scores, no designation)