The 18TH ANNUAL ATLANTA CROWN INVITATIONAL
January 15th – 17th, 2010
USAG COMPETITION ENTRY FORM

Email _____ **(Please print clearly)**

Team Name _____ Phone _____

Address _____ Fax _____

City _____ State _____ Zip _____

$110 per gymnast level 7- Open
$75 per gymnast level 4-6 / Prep-Op

$50 per team per level

$10 late fee per gymnast

$110 x (Lvl 7 - Open)	_____
$75 (Lvl 4-6 & Prep-Op)	_____
$50 x # Teams (*after 10/1)	_____
$10 Late Fee / Gymnast	_____
Less $100 Deposit	_____
TOTAL	_____
Check #	_____
Date Rec'vd	_____

All entries and payment must be postmarked by November 1, 2009. Make checks payable to GGCBC and return to:

Alicia Muirhead
680 Riverside Walk Xing
Sugar Hill, GA 30518

Phone: 678-687-6738
Gym: 770-921-5630
Fax: 770-921-5111

Coach's Name			
USAG #			
Safety Certification Expiration Date			

* Team fees are waived for entries post-marked by 10/1/2009. NO EXCEPTIONS !!!!

ALL ENTRIES MUST BE ON THIS FORM AND ALL INFORMATION MUST BE COMPLETED FOR EACH GYMNAST

USAG #	Last Name	First Name	Level	DOB	Citizen Y/N