

USA Gymnastics
Safety Course Request Form (Revised Sept 2008)

A completed form is required to schedule a course. No registrations will be accepted, no books will be shipped and no payment will be made without receipt of this request form.
Please confirm that all information is correct! Please print legibly - especially if faxing.
If received by 90 days prior to course, this information will be published in *Technique*.

Date _____ Time _____ Course Code _____

Location _____ Address _____

City _____ State _____ Zip _____

Local Contact: Name _____ Phone _____

Local Contact Email (required) _____

Course Instructor _____ Mbr# _____ Phone _____

Email (required) _____

Vendor # _____ Anticipated attendance: _____ (required) Optional - Maximum # of students: _____

Special Notes: _____

**You will receive an email confirmation when course packet is shipped.*

Required for expense reimbursement:

(check one) Mileage* or Airfare: **Preferred airlines _____

Departure airport _____ Arrival airport _____

**Arrival date/time _____ **Departure date/time _____

Hotel date _____ **Preferred Hotel _____

Meals \$ _____ (\$25 maximum per day) breakfast = \$7 maximum lunch = \$8 max dinner = \$10 max

Other \$ _____ Reason: _____

**Mileage will be reimbursed based on the MapQuest mileage of your home address to the course location.*

***Preferences may not always be met, depending on costs.*

SHIPMENTS NEEDED (Required)

Book Units: _____ (1 unit = 25 books)

Test Answer sheets: _____

Tests needed: _____

Ship books and/or packet to the following address: (REQUIRED)

CURRENT INVENTORY

Books _____

Requests must be received in our office a minimum of four weeks prior to the course.

USA Gymnastics
Attention: Educational Services
132 E. Washington Street, Suite 700
Indianapolis, IN 46204
Or fax: 317-692-5212 attn: Educational Services