

USA Gymnastics

Application to Host the Gymnastics for All Nationals

This application is submitted in the interest of hosting the following event to be conducted under the auspices of USA Gymnastics.

Part I: General Information

- 2010 Gymnastics for All Nationals – TeamGym Nationals, National GymFest, and the USA *Gymnastics for All Challenge*.
- Proposed Dates:
1st choice: _____ 2nd choice: _____ 3rd choice _____
- The sponsoring Organization of this Event will be:
Name _____
Address _____
City _____ State _____ Zip _____
- The Chief Officer of the Sponsoring Organization is:
Name _____
Address _____
City _____ State _____ Zip _____
Phone: (Day) ____ - ____ - _____ (Night) ____ - ____ - _____ (Dell) ____ - ____ - _____
Email _____
- The proposed Event Director is:
Name _____
Address _____
City _____ State _____ Zip _____
Phone: (Day) ____ - ____ - _____ (Night) ____ - ____ - _____ (Dell) ____ - ____ - _____
Email _____
- How many competitions, meets or event did you conduct in the last two years?
Local _____ National _____
State _____ International _____
Invitational _____
- What was the number of attendance at your largest event? _____

Part II: Facility Information

- Name and Address of proposed Facility or Arena
Name _____
Address _____
City _____ State _____ Zip _____
Phone: (Day) ____ - ____ - _____ (Night) ____ - ____ - _____ (Dell) ____ - ____ - _____
Web address (URL) _____
Contact Person _____ Phone ____ - ____ - _____

2. Competition/Event Facility Description – Please provide floor plans and facility photos if possible.

Check appropriate items and provide approximate numbers if appropriate regarding availability of...

Parking considerations (free?) _____

Spectator seating

Capacity _____

Type (bleachers, arena-style, folding chairs): _____

Is there a cost for this? _____

Concession sales and Exhibitor area(s) such as for food/T-shirts, etc.

Dressing rooms _____

Facility rental fee _____

What other extra fees does the facility charge? (Security, Internet, etc.)

Type of floor surface (wood, carpet, tartan, cement, etc.) _____

Floor dimensions for set-up _____

Hospitality room(s) _____

Internet connection availability and charges _____

Judges' meeting room _____

Locker rooms _____

Trainer/Medical room _____

What type of Emergency Medical Personnel and Supplies will be available at the event site?

Sound system / Announcing system

Name and contact information for local A/V provider(s)

Production office

Suggested spectator ticket prices – going rate in your area _____

3. Training warm-up available at site: ____ Yes ____ No

Floor dimensions

If training gym is not available at site of competition, please give details as to location and distance from competition site.

4. Equipment

Please attach a complete list of all available gymnastics equipment that you can provide for training, warm-up and competition. List the name brand of equipment, type, quantity, and condition of each piece of equipment and identify if all pieces of equipment meet FIG specifications.

Name and contact information for area gymnastics competition equipment providers.

Part III: Support Personnel

Please identify the availability and number of the following personnel:

- Athlete Trainer\Medical Doctor _____
- Audio Personnel _____
- Auxiliary judges _____
- Credentialing Personnel _____
- Experienced Announcer _____
- Experienced Scoring Personnel _____
- Equipment set-up and teardown Personnel _____
- Photographer _____
- Publicity/Media Personnel _____
- Score Flashers Personnel _____
- Score Runners Personnel _____
- Videographer _____
- Other? _____
- _____

Part IV: Travel and Accommodations

Please note that National Travel Systems (NTS) is the official travel agency for USA Gymnastics and will be involved in advising and managing this area.

1. Nearest airport _____
 2. Type of transportation available from airport to hotel (such as busses, hotel shuttle, limo service, etc.)
Name _____
Address _____
City _____ State _____ Zip _____
Phone: (Day) ____ - ____ - _____ (Night) ____ - ____ - _____ (Dell) ____ - ____ - _____
Distance from airport: miles _____ time _____
 3. Hotel Name _____
Address _____
City _____ State _____ Zip _____
Phone: (Day) ____ - ____ - _____ (Night) ____ - ____ - _____ (Dell) ____ - ____ - _____
Internet connection availability and charges _____
Web address (URL): _____
Rates per night
Single \$ _____ Double \$ _____ Triple \$ _____ Quad \$ _____ Tax Rate - _____
Average price of meals at host hotel:
Breakfast \$ _____ Lunch \$ _____ Dinner \$ _____
 4. Area restaurants within walking distance of official lodging site?

- Will food be available at the competition site? _____ Yes _____ No
- If not, what arrangements will be made? _____

5. List points of interest to sightseers

6. Possible social events, banquets, parties (include approximate costs if possible).

Part V: Publicity

Which of the following can be expected (please check, add explanation if appropriate):

- In-house coverage
- Local Papers
- Radio
- Television
- Advance press
- Conferences
- Other:

Comments:

Part VI: Sponsors

All sponsor involvement is subject to USA Gymnastics approval. Please list potential sponsor involvement below:

Name of Sponsor 1 _____
Nature of Involvement _____ Amount/Type of donation _____

Name of Sponsor 2 _____
Nature of Involvement _____ Amount/Type of donation _____

Name of Sponsor 3 _____
Nature of Involvement _____ Amount/Type of donation _____

Name of Sponsor 4 _____
Nature of Involvement _____ Amount/Type of donation _____

Other?

Return to:

Steve Whitlock –

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