



**OFFICIAL ENTRY
FORM**

**2010 Rhythmic
National Qualifier**

ATHLETE NAME: _____

Athlete #: _____ Athlete DOB: _____ Athlete Level: _____

NAME OF CLUB: _____ Phone: _____

Fax: _____ Email: _____

ADDRESS: _____
street

_____ city state zip

Coach : _____ Pro#: _____

*******IMPORTANT*******

1) PAYMENT MUST ACCOMPANY ENTRY FORM FOR ATHLETE TO BE REGISTERED.

2) NO REFUNDS WILL BE ISSUED.

Entry Fee: **\$135.00** Make Checks Payable to  **USA GYMNASTICS**

Charge  Other _____ Exp. Date ____/____/____

Card # _____ Amount _____

Signature of Card Holder _____ Printed Name _____

Mail or FAX Entry Form and Fee: Stephanie Parrish FAX (317)237-5069
USA Gymnastics
132 E. Washington Street Suite 700, Indianapolis, IN 46204
Email: sparrish@usa-gymnastics.org

Deadline to accept entries JULY 5, 2010.

ENTRIES RECEIVED AFTER JULY 5 WILL NOT BE ACCEPTED