



2017/2018 USA GYMNASTICS REQUEST FOR SANCTION

\$100

A separate sanction request is REQUIRED for each event location and discipline. This sanction request form does NOT apply to meets involving athletes from a foreign country or invitational events involving USA National Team Members. Please see the Rules & Policies for details.

MEET DETAILS *All fields are REQUIRED.*

Region No. _____ State _____ Event Dates _____ Date of 1st Session _____ Date of Last Session _____
Name of Meet _____ Site Name & Address (if different than club) _____

Type of Meet: Local Sectional State Regional National Invitational Exhibition/Workshop/Clinic/Testing

Discipline:

Select only ONE discipline type per sanction request. Example: Men's and Women's events held during the same meet in the same facility require TWO separate sanctions.

Women's 1 2 3 4 5 6 7 8 9 10 Elite
 Bronze Silver Gold Diamond Platinum HUGSW

Men's DIV.1: 4 5 6 7 DIV.2: 4 5 6 7
 JR. OLYMPIC: 8 9 10 Elite Jr. Development Bronze Silver Gold HUGSM

T & T 1 2 3 4 5 6 7 8 9 10 Elite HUGST

Rhythmic 1 2 3 4 5 6 7 8 9 10 Elite HUGSR
 Beginner Group Intermediate Group Advanced Group Advanced Group XCEL: A B C

Acrobatic 1 2 3 4 5 6 7 8 9 10 Group Elite Blocks

Gymnastics for All Group Team Gym Level (1-10) _____ Team Acro & Tumbling: Youth Senior Rhythmic Gym Challenge
 HUGS: Women Men T&T Rhythmic

MEET DIRECTOR & CLUB DETAILS *All fields and Meet Director signature are REQUIRED.*

Meet Director Name _____ Professional Membership No. _____
Club Name _____ Club No. _____
Club Address _____ State _____ Zip _____
Phone _____ Fax _____ Email _____

I am a professional member in good standing with USA Gymnastics. I hereby agree that the above referenced event will be conducted in accordance with applicable USA Gymnastics Rules and Policies. I represent that I (a) thoroughly understand the USA Gymnastics Rules and Policies, (b) fully assume responsibility for this event and agree to be held accountable for any irregularities that might occur. I acknowledge that it is my responsibility to verify that all athletes, coaches, and judges are registered USA Gymnastics members in good standing. **I further certify that no persons permanently ineligible for membership in USA Gymnastics will be associated with this event in any way. A list of ineligible members is located at www.usagym/ineligible.** I understand that there may be fines and penalties for (a) any violations of the rules and policies or (b) any violation of certifications and/or any failure to adhere to the approved dates and/or times may include the loss of sanctioning privileges.

Signature of Meet Director _____ Date _____

ONLINE RESERVATION INFORMATION

Provide the details below in order to ensure proper activation of the online reservation system for the sanctioned event.

* Provide a start date to begin athlete/coach meet reservations: _____ * Provide the last date to which athlete/coach meet reservation may be cancelled: _____
* Provide a close/end date for athlete/coach meet reservations: _____ * Provide the last date to which an athlete level change may be made to a reservation: _____

PAYMENT INFORMATION

Credit Card _____ Card # _____ Exp. Date _____
Print Cardholder Name _____
Signature _____
Cardholder Phone _____ Email (for receipt) _____

Office Use Only
Number _____
Rec'd Date _____
Payment Amt _____
Check No. _____
Email sent date _____
Approval _____
By _____ Other _____

PAYMENT TOTALS - Make checks payable to USA Gymnastics

Sanction fee: \$100

If faxing/mailling the request form, please allow 7-10 business days from the date the form is received for processing.

Please return forms: 130 E Washington St., Ste. 700 • Indianapolis, IN 46204 or fax 317.692.5212 or register online - www.usagym.org

Questions? Contact Member Services at 800.345.4719 or membership@usagym.org