JUDGING ACCREDITATION
REGISTRATION FOR EXAMINATION

Mail and faxed Registration Forms must be RECEIVED by USA Gymnastics a minimum of two (2) weeks prior to the Exam Date. A late fee of $10 per part is charged if registering within two weeks of the exam date. USA Gymnastics reserves the right to cancel any Exam Session with fewer than five (5) test part registrations.

APPLICATION INFORMATION

REGISTRANT NAME ________________________________ USA GYM MEMBERSHIP # ________________
First Last
MAILING ADDRESS ____________________________________________ CITY ________________
STATE _____ ZIP _______ E-MAIL ADDRESS ____________________________
DAYTIME PHONE (_____) ____________________________
BIRTH DATE (REQUIRED MINIMUM AGE, 16) ________________________ GENDER: FEMALE _____ MALE _____
(MM/DD/YYYY)

EXAM INFORMATION

EXAM DATE ________________________________________________ LOCATION (CITY/STATE) ____________________________

TEST ADMINISTRATOR __________________________________________

CHECK THE TEST PART(S) FOR WHICH YOU ARE REGISTERING (1ST WRITTEN EXAM AFTER AUG. 1 OF EACH YEAR IS A1, THEN B1, A2, B2)

<table>
<thead>
<tr>
<th>LEVEL 4/5</th>
<th>LEVEL 6/7/8</th>
<th>LEVEL 9</th>
<th>LEVEL 10</th>
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</thead>
<tbody>
<tr>
<td>WRITTEN FORM A1/A2</td>
<td>A1</td>
<td>A2</td>
<td>A1</td>
</tr>
<tr>
<td>PRACTICAL</td>
<td>N/A</td>
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* FOR YOUR FIRST WRITTEN EXAM AFTER AUGUST 1 OF EACH YEAR - SELECT FORM "A1" IF RE-TEST IS NECESSARY, SELECT B1

PAYMENT INFORMATION

☐ VISA ☐ OTHER ________________________________
CARD # ________________________________ EXPIRATION DATE _____ / _____
NUMBER OF EXAM PARTS ______ X $25.00/PART (+ $10 LATE FEE PER EXAM PART = _______ ) = TOTAL _______
SIGNATURE OF CARDHOLDER ________________________________ PRINT NAME ________________________________
ADDRESS ____________________________________________ STATE _____ ZIP CODE _______
E-MAIL ________________________________ (Enter address & e-mail if cardholder is different than applicant)

MAKES CHECKS PAYABLE TO USA GYMNASTICS

CONFIRMATION OF REGISTRATION IS SENT VIA E-MAIL * REGISTRATION IS THE OWNERSHIP OF THE INDIVIDUAL AND IS NON-REFUNDABLE

** EXAMINEES MUST BRING ONE OF THE FOLLOWING TO THE TESTING SITE, OR YOU WILL NOT BE PERMITTED TO TAKE THE TEST:
• PHOTO ID CARD/LICENSE
• RATING CARD, IF CURRENTLY RATED

REVISED JANUARY 1, 2018

RETURN TO:
CONNIE MALONEY
USA GYMNASTICS
130 E. WASHINGTON ST., SUITE 700
INDIANAPOLIS, IN 46204
OR FAX: 317.237.5069
cmaloney@usagym.org

USA GYMNASICS UNIVERSITY
School of Judging