

Hold Your Teams Spot - \$200 Non-Refundable Deposit Required per Meet

Please Circle and Use one Form for Each Meet

WDGVC-January 28-31, 2010 MRGVC-February 13-14, 2010 SMGVC-February 26-28, 2010

CLUB NAME: _____

CLUB ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CLUB EMAIL: _____

CLUB USAG #: _____ CLUB AAU #: _____ CLUB AK #: _____

CONTACT NAME: _____ PHONE: _____

USAG Sanctioned (Approximate)

	Women	Men (WDGVC only)	
Level 3: Number of Gymnasts	_____		
Level 4: Number of Gymnasts	_____	_____	
Level 5: Number of Gymnasts	_____	_____	
Level 6: Number of Gymnasts	_____	_____	
			Total _____
Prep Opt: Number of Gymnasts	_____		
Level 7: Number of Gymnasts	_____	_____	
Level 8: Number of Gymnasts	_____	_____	
Level 9: Number of Gymnasts	_____	_____	
Level 10: Number of Gymnasts	_____	_____	
			Total _____

AmeriKids Sanctioned (Approximate) (MRGVC only)

Level 2: Number of Gymnasts	_____		
Level 3: Number of Gymnasts	_____		
Level 4: Number of Gymnasts	_____		
			Total _____
Level 5: Number of Gymnasts	_____		
Level 6: Number of Gymnasts	_____		
Level 7: Number of Gymnasts	_____		
Level 8: Number of Gymnasts	_____		
Level NO: Number of Gymnasts	_____		
Level IO: Number of Gymnasts	_____		
			Total _____

AAU Sanctioned (Approximate)

Level 2: Number of Gymnasts	_____		
Level 3: Number of Gymnasts	_____		
Level 4: Number of Gymnasts	_____		
Level 5: Number of Gymnasts	_____		
Level 6: Number of Gymnasts	_____		
			Total _____
Level MO: Number of Gymnasts	_____		
Level IO: Number of Gymnasts	_____		
Level 7: Number of Gymnasts	_____		
Level 8: Number of Gymnasts	_____		
Level 9: Number of Gymnasts	_____		
			Total _____

Check #: _____ TOTAL: \$ 200.00

Full Entry Required by:

WDGVC - November 16, 2009

MRGVC-December 14, 2009

SMGVC-January 9, 2010

More information available at:

www.netlynxevents.com

Make Checks Payable and mail to:

**WDGVC or
MRGVC or
SMGVC
4113 Whitney St
Janesville, WI 53546**