

LEVEL 3 & 4 STATE CHAMPIONSHIPS

December 13-15, 2024

Club Name:	CLUB USAG #	#:	
Club Address:	City:	State:	_ Zip:
Gym Phone:	Alt. Phone:		
Gym E-Mail:	Coach E-Mail:		

Entry Fees: \$100 per gymnast, \$50 per Team

Level	Number of Gymnasts		Entry Fee		Total		Team Fee		Total
		Х		=		+		Ш	\$
		Х		=		+		=	\$
		Х		=		+		=	\$
		Х		=		+		I	\$
		Х		=		+		=	\$
		Х		=		+		=	\$
		Х		=		+		=	\$
		Х		=		+		=	\$
		Х		=		+		I	\$
		Х		=		+		I	\$

TOTAL ENTRY DUE: \$_____

I have completed USA Gymnastics Meet Reservation for the Level 3-4 State Championships _____