

USA COMPETITIONS ATHLETE ENTRY FORM

(A club may use their own entry form or Excel sheet, provided all required information is included)

EVENT ENTERING: _____

Club Name: _____ **CLUB USAG #** _____

Club Address: _____

City _____ State: _____ Zip: _____

Gym Phone: _____ Fax: _____ Alt. Phone: _____

Gym Email: _____ Coach Email: _____

Attending coaches names & USAG Pro #'s: _____

Enter athlete information below. **USE ONE FORM FOR EACH LEVEL.** Specify USAG or AAU entries by filling in the proper column. **For Prep. Opt. level entries, specify Open or Novice division (per Florida P.O. rules, posted at: http://www.usagfl.org/comp_preprules.htm).

Competitor Name (First, last)	USAG Level	AAU Level	Athlete Number	Date of Birth
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Please calculate your entry fee total according to the fees listed on the specific event's meet information page. If paying by check, make one club check payable to **USA Competitions**.

**No refunds after entry deadline. However, substitutions may be made.*

Level	Number of athletes		Entry Fee		Total
USAG Level 2-3		X	\$	=	\$
USAG Level 4-6		X	\$	=	\$
USAG Optional		X	\$	=	\$
AAU Level 2-3		X	\$	=	\$
AAU Level 4-6		X	\$	=	\$
AAU Optional		X	\$	=	\$

Team entry levels: _____ **Total team fees (\$50 per level):** \$ _____

Total entry due \$ _____ **Amount paid \$** _____ **Balance due \$** _____

MasterCard, Visa and American Express payments are also accepted. If paying by credit card, please provide the following information:

Name on card: _____ Card type (circle): M/C V AM EX
 Card number: _____ Expiration: _____

Send completed entry forms and payment to:
USA Competitions 5722 South Flamingo Rd. #120 Cooper City, Florida 33330
Faxed entries are accepted with credit card payments: 866-329-5709