## Men's and Women's ENTRY CHANGES FORM

Gym Name		Cl	ub #
Gym Address			
City	St	ate	Zip
Gym Phone	Fax	Email	
Primary Contact (if other than head coach	)	Ph	one

## **CHANGE OF LEVEL**

Complete the table below for each PREVIOUSLY REGISTERED athlete whose level needs to be updated from your club's original registration.

Changes submitted after November 1, 2022 will be subject to a \$25 per athlete change fee.

	Gymnast Name	M/F	Date of Birth	Previously Registered Level	Updated Level
1)					
2)					
3)					
4)					
5)					

## ADD ADDITIONAL ATHLETES

Complete the table below for athletes who need to be added to your club's existing registration. Please note: Registrations are not final until payment has been received in full.

Gymnast Name	M/F	Level	Date of Birth	Reservation Name of Athlete's Room (first and last name)
1)				
2)				
3)				
4)				
5)				

## **SCRATCH ATHLETES**

Complete the table for each PREVIOUSLY REGISTERED athlete who needs to be scratched. **Refund Deadline: October 21, 2022** 

Gymnast Name	M/F	Level	Date of Birth	Reason for Scratch
1)				
2)				
3)				