

Great Lakes Zone Gymnastics Championships 2009

Level 6

TEAM: _____

C - CADETS 6 TO 10 YEARS
P - PREPS: 11 & 12 YEARS
JR. – junior, 13 & 14 YEARS
SR. – senior, 15 & OLDER

PLEASE USE ONE PAGE FOR EACH LEVEL

coach: _____

e-mail address _____

how many other coaches will be coming?

PHONE NUMBER: _____

Sat. _____ Sun. _____

* please check if gymnast is graduating senior

COMPETITOR LAST NAME, FIRST NAME	*	LEVEL	AGE GROUP	AGE ON 12/1/08	BIRTHDAY	YMCA membership exp. date	HAS ONE score	IS QUALIFIED
1.		6						
2.		6						
3.		6						
4.		6						
5.		6						
6.		6						
7.		6						
8.		6						
9.		6						
10.		6						
11.		6						
12.		6						
13.		6						
14.		6						
15.		6						
16.		6						
17.		6						
18.		6						
19.		6						
20.		6						
21.		6						
22.		6						
23.		6						
24.		6						
25.		6						

Please return this Team Registration Form
include individual waiver forms & fees

to North Canton YMCA Gymnastics Center
7241 Whipple Ave. N.W.
North Canton, OH 44720

All entries must be received by mail no later than March 30, 2009. No faxes will be accepted.