

2020 Simone Biles International Invitational Entry Form

Attending Clubs Name: _____	USAG Club # _____
Street Address: _____	Phone # _____
City: _____ State: _____ Zip: _____	Email: _____

Attending Coach	USAG #	USAG Exp	Safety Exp	Background Exp

Separate sheet per Level requested

	First Name (typed)	Last Name (typed)	Level	USAG #	DOB		
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

Meet Director's Use	
Date Rec'd:	
Check # :	
Amount:	
Short / Over:	

Gymnast X \$ _____	Entry Fee =	\$ _____
Team Entry X \$50	Entry Fee =	\$ _____
TOTAL ENCLOSED:		\$ _____

Contact Coaches Name(typed):		Cell Phone # (Required)	
Contact Coaches Email Address:		Signature:	

of coaches attending the Saturday night Coaches Party (must be 21 years old) _____