

Ghost & Goblin Meet Entry

October 23, 24th & 25th
2009



Mail Registrations to: Flyaways Gold Booster Club
255 7th Ave NW - Ste. A
Forest Lake, MN 55025
FAX: 651-982-1580

Club Name: _____	USAG Club Number: _____
Club Address: _____	Phone: _____
City: _____	State: _____ Zip: _____
Contact Name and Email Address: _____	

	Coach Name	USAG Number		Safety Cert. Exp. Date
1				
2				
3				
4				

	Competitor Name	Athlete USAG Number	Level	Age	Date of Birth
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Number of Level 4 Gymnasts: _____ X \$70.00 = \$ _____
 Number of Level 5 Gymnasts: _____ X \$70.00 = \$ _____
 Number of Level 6 Gymnasts: _____ X \$70.00 = \$ _____

TOTAL ENCLOSED: \$ _____

**Please make checks payable to
Flyaways Gold Booster Club**