

AAU Entry Form

Club Name: _____

Club Phone: (____) ____-____ Club Fax: (____) ____-____

Club Address: _____ City: _____ Zip: _____

Club Email: _____



Coaches Attending:

****Use one form per level**

	Name	AAU #		Name	AAU#
1			5		
2			6		
3			7		
4			8		

CIRCLE LEVEL 2 3 4 5 6 7 8 9 10

	Athlete's Name	AAU #	Birthdate	Division	Highest AA
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Total Number of Entries _____ x \$ _____ = \$ _____ + Team Fee: \$ _____
 = Total Due: \$ _____

****CHECK MUST BE INCLUDED WITH ENTRY****

Please make all checks payable to Golden City Gymnastics.
 Check the meet information sheet for entry and team fee amounts.