

**2010 USA GYMNASTICS  
LEVEL 9 EASTERN/WESTERN CHAMPIONSHIPS**

**Individual Athlete Entry Form**

**This form MUST be collected by the Regional Administrative Committee  
Chairman or their designee at Regionals following each session.  
The Club coach must complete the Club Entry Form after the last session  
in which they have gymnasts competing.**

**PLEASE USE THE TAB KEY TO ADVANCE TO THE NEXT FIELD  
OR PRINT CLEARLY**

*This form (with the exception of the check-boxes) must be completed by each Regional competitor prior to the Regional Meet. After the completion of each session, Qualifiers and Alternates can then quickly check the appropriate box and submit it to the Regional person in charge of collecting Entry Forms.*

**Athlete First/Last Name:** \_\_\_\_\_ **USAG #:** \_\_\_\_\_

**Birth Date (MM/DD/YY):** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **Age Division:** \_\_\_\_\_

**Club Affiliation:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Coach:** \_\_\_\_\_ **Coaches' Cell phone: ( )** \_\_\_\_\_

**REGIONAL TEAM QUALIFIER**

**INDIVIDUAL QUALIFIER**

**ALTERNATE (1<sup>st</sup> or 2<sup>nd</sup>)**

**Region #** \_\_\_\_\_