

2016 Arctic Blast

OFFICIAL ENTRY FORM

**Deadline for entries and FULL payment is
November 4, 2016**

Office Use Only

Date Rec'd _____

Chk # _____

Amount _____

Gym Name:	Gym Phone:	
Contact Name & Phone Number:	Gym Fax:	
Gym Address:	Gym Email:	
City, State, Zip:		

IMPORTANT ! ALL COACHES' AND GYMNAST INFORMATION MUST BE SUBMITTED WITH ENTRY

Coaches Name:	USAG #	Safety Expiration Date:
Coaches Name:	USAG #	Safety Expiration Date:
Coaches Name:	USAG #	Safety Expiration Date:
Coaches Name:	USAG #	Safety Expiration Date:

Gymnasts Name	USAG #	Level	Birthdate	Age As of State Meet	T-Shirt Size (USAG Only) (Circle One)
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For more information contact Jeff Carter at Mat Trotters Gymnastics

Entry Fee Calculation

Please send completed entry form to:
 Mat Trotters Gymnastics - Attn: Arctic Blast
 7009 NW 63rd St. • Oklahoma City, OK 73132
 Phone: (405) 722-0808 Fax: (405) 722-0821

Levels 3 - 5 _____ x \$70

Levels 6 - 10 _____ x \$80

TOTAL AMOUNT DUE \$

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