

2017 Arctic Blast

OFFICIAL ENTRY FORM

**Deadline for entries and FULL payment is
October 13, 2017**

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	AAU _____ x \$30	
	Levels 3 - 5/Xcel _____ x \$70	
	Levels 6 - 10 _____ x \$80	

TOTAL AMOUNT DUE \$

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