Spirit of the Flame Challenge Entry Form

Check payable to WVGBC **Mail to Spirit Of The Flame Challenge,**
P.O. Box 877 Los Gatos, Ca 95031-0877
Phone: 408-205-6601 Fax: 408-356-7314 Email: abra@spiritoftheflame.com

CLUB INFORMATION		
Club Name:		
Club Number:	E mail:	
Street Address:	Phone no.:	
City:	State:	ZIP Code:
Leotard Colors:	Sweat Colors	

COACH INFORMATION		
NAME	USAG NUMBER	SAFETY CERT. EXPIRATION

GYMNAST INFORMATION					
NAME	REG #	LEVEL	AGE	DATE OF BIRTH	T-SHIRT SIZE

abra@spiritoftheflame.com

Number of Compulsory/Xcel Gymnasts:	$95.00 1/7/12	:$105.00 2/1/12	$115.00 2/7/12	Subtotal:	Cost per Gymnast
Number of Optional Gymnasts:	$105.00 1/7/12	115. 00 2/1/12	$125.002/7/12	Subtotal:	Cost per Gymnast:
Number of T N T:	$95.00 1/7/12	$105.00 2/1/12	$ 105.00 2/7/12	**Subtotal:**	Cost per Gymnast
Check Number:			**TOTAL:**		-
Date Received:			Less Deposit:		
Number of Coaches Attending Meet:			Still Owed:		
Number of Coaches Attending Party:		Leo Colors:		Warmup Colors:	

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