



****WEEKEND 1****

FEBRUARY 14th – 16th

****IN ADDITION TO THIS FORM, EACH CLUB IS REQUIRED TO ENTER THROUGH USA GYMNASTICS MEET RESERVATIONS****

CLUB _____ USAG CLUB # _____

Contact name: _____ Email address: _____

Phone # _____

LEVEL 1 _____ X \$135 = \$ _____

LEVEL 2 _____ X \$135 = \$ _____

LEVEL 3 _____ X \$135 = \$ _____

LEVEL 4 _____ X \$135 = \$ _____

LEVEL 5 _____ X \$135 = \$ _____

LEVEL 6 _____ X \$160 = \$ _____

LEVEL 7 _____ X \$160 = \$ _____

LEVEL 8 _____ X \$160 = \$ _____

LEVEL 9 _____ X \$160 = \$ _____

LEVEL 10 _____ X \$160 = \$ _____

XCEL B / S / G _____ X \$135 = \$ _____

XCEL P / D / SA _____ X \$160 = \$ _____

TOTAL ENTRY FEES \$ _____

TOTAL # OF TEAMS ENTERED _____ X \$75 = \$ _____

TOTAL DUE \$ _____

CIRCLE EACH LEVEL YOU ARE ENTERING INTO TEAM COMPETITION

LEVEL: 1 2 3 4 5 6 7 8 9 10

XCEL: BRONZE SILVER GOLD PLATNIUM DIAMOND SAPPHIRE

MAIL FORM & CHECK PAYABLE TO: METROPLEX GYMNASTICS
Metroplex Challenge 205 E Bethany, Allen TX 75002