



Official TAAF State Meet Entry Form

Meet Name _____ Meet Date _____

Attending Gym's Name _____ **Gym Club Number:** _____

Address: _____ City _____ Zip _____

Coaches Attending 1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____

Main Contact _____ Email where information should be sent _____

Main Phone # to contact with meet information or questions _____

Gym Phone # _____ Gym Email _____

Last Meet Attending Before This Meet

| | First Name | Last Name | ATHLETE # | Level | Division |
|----|------------|-----------|-----------|-------|----------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| 8 | | | | | |
| 9 | | | | | |
| 10 | | | | | |
| 11 | | | | | |
| 12 | | | | | |
| 13 | | | | | |
| 14 | | | | | |
| 15 | | | | | |
| 16 | | | | | |
| 17 | | | | | |
| 18 | | | | | |
| 19 | | | | | |
| 20 | | | | | |

Number of Achievement Gymnasts (Levels 1,2 & Xcel Bronze) _____ x \$75.00

= _____ Number of Placement Gymnasts:

(Levels 3-9, Xcel Silver, Gold, Platinum, Diamond & Sapphire) _____ x \$90.00 = _____

| |
|-------------------|
| Total Due: _____ |
| Total Paid: _____ |
| Check #: _____ |
| Date: _____ |

ALL CLUBS ARE AUTOMATICALLY ENTERED INTO TEAM. - SM/MED/LG

NOTE: ENTRIES MUST BE COMPLETE WITH THE ASSIGNED ATHLETE NUMBER. THESE NUMBERS WILL BE THE SAME YEAR AFTER YEAR. ENTRIES MAY BE EMAILED BUT NOT OFFICIAL UNTIL ENTRY FEES ARE PAID. ALL LATE ENTRIES, IF ACCEPTED, WILL BE CHARGED A LATE FEE PER CURRENT TAAF RULES.