



Meet Entry Form

Event Northern California State Championships Date March 2, 2008

Team Name _____ USAG Club Number _____

Club Name _____ Head Coach _____

Mailing Address _____

City _____ State ____ Zip _____ Phone (____) ____ - _____

LIST ALL COACHES ATTENDING COMPETITION:

Name	USAG Pro Membership Number	Safety Certification Expiration Date

Signature of Head Coach _____ Date _____

_____ Level 5 @ \$55.00 = _____

_____ Level 6 @ \$65.00 = _____

_____ Level 7 @ \$85.00 = _____

_____ Level 8 @ \$85.00 = _____

_____ Level 9 @ \$95.00 = _____

_____ Level 10 @ \$95.00 = _____

_____ Group @ \$60.00/event = _____

TOTAL FEE ENCLOSED = _____

CHECK NUMBER = _____

This Entry Form must be postmarked by January 12, 2008

Return this cover sheet along with appropriate USAG Level entry forms to:

Rhythmic Academy of Marin
P.O. Box 151102
San Rafael CA 94915-1102

Guest Award Policy: Southern California guest athletes are in separate award category and receive separate awards according to the same number criteria as Northern California competitors.

Athletes with medical reasons validated by a physician may request a 50 % refund. (Written request must be received within 3 business days of the meet.)

Age Group Descriptions: As Per USAG Rhythmic Program Rules and Polices