

# 24<sup>th</sup> ANNUAL BARRON INVITATIONAL MEET ENTRY FORM

## DECEMBER 4-6, 2020

**NOTE:** Use this form for payment. All gymnasts and coaches must be entered through the USAG website.

If you are not going to use the entry form provided, please provide all the information requested. All information must be complete for the entry form to be accepted. All coaches and athletes must be in good standing with USA Gymnastics to be allowed on the floor, or the meet director and coach in violation will be fined \$100 each by USA Gymnastics.

TEAM NAME: \_\_\_\_\_ **USA CLUB #** \_\_\_\_\_

TEAM ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TEAM CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

COACH NAME/CELL FOR EMERGENCY: \_\_\_\_\_

**ENTRIES – All entry fees include tax**

Levels 3-5: \$87 per gymnast • Levels 6-10: \$102 per gymnast • Xcel All Levels: \$96 per gymnast •  
Team Entry: \$45 per level

**Team Entry**

| Y or N | Level         | # of gymnasts | x price | Total Due |
|--------|---------------|---------------|---------|-----------|
| _____  | Level 3       | _____         | \$87    | _____     |
| _____  | Level 4       | _____         | \$87    | _____     |
| _____  | Level 5       | _____         | \$87    | _____     |
| _____  | Level 6       | _____         | \$102   | _____     |
| _____  | Level 7       | _____         | \$102   | _____     |
| _____  | Level 8       | _____         | \$102   | _____     |
| _____  | Level 9       | _____         | \$102   | _____     |
| _____  | Level 10      | _____         | \$102   | _____     |
| _____  | Xcel Bronze   | _____         | \$96    | _____     |
| _____  | Xcel Silver   | _____         | \$96    | _____     |
| _____  | Xcel Gold     | _____         | \$96    | _____     |
| _____  | Xcel Platinum | _____         | \$96    | _____     |
| _____  | Xcel Diamond  | _____         | \$96    | _____     |

\_\_\_\_\_ **Total # Team Entries x \$45 =** \_\_\_\_\_ **+ Total Entries** \_\_\_\_\_ **= Total Due \$** \_\_\_\_\_

**Entries must be postmarked by October 5, 2020.** Entries accepted first come first serve. Meet may fill prior to deadline. Send entries with check payable to: Barron Gymnastics

|                     |                              |
|---------------------|------------------------------|
| Barron Gymnastics   | Meet Secretary               |
| 5411 Jedmed Ct.     | Melissa Barron               |
| St. Louis, MO 63129 | melissa@barrongymnastics.com |
|                     | 314-892-6909                 |

Team Name: \_\_\_\_\_

| Coaches Names | USA Pro #/Expiration | Safety Expiration | Background Expiration | U100 | Safe Sport |
|---------------|----------------------|-------------------|-----------------------|------|------------|
| _____         | _____/____           | _____             | _____                 | Y/N  | Y/N        |
| _____         | _____/____           | _____             | _____                 | Y/N  | Y/N        |
| _____         | _____/____           | _____             | _____                 | Y/N  | Y/N        |
| _____         | _____/____           | _____             | _____                 | Y/N  | Y/N        |
| _____         | _____/____           | _____             | _____                 | Y/N  | Y/N        |
| _____         | _____/____           | _____             | _____                 | Y/N  | Y/N        |
| _____         | _____/____           | _____             | _____                 | Y/N  | Y/N        |

### COMPETITORS

|    | Name | Date of Birth | USA # | Level |
|----|------|---------------|-------|-------|
| 1  |      |               |       |       |
| 2  |      |               |       |       |
| 3  |      |               |       |       |
| 4  |      |               |       |       |
| 5  |      |               |       |       |
| 6  |      |               |       |       |
| 7  |      |               |       |       |
| 8  |      |               |       |       |
| 9  |      |               |       |       |
| 10 |      |               |       |       |
| 11 |      |               |       |       |
| 12 |      |               |       |       |
| 13 |      |               |       |       |
| 14 |      |               |       |       |
| 15 |      |               |       |       |
| 16 |      |               |       |       |
| 17 |      |               |       |       |
| 18 |      |               |       |       |
| 19 |      |               |       |       |
| 20 |      |               |       |       |

Team Name: \_\_\_\_\_

**ADDL. COMPETITORS**

|    | <b>Name</b> | <b>Date of Birth</b> | <b>USA #</b> | <b>Level</b> |
|----|-------------|----------------------|--------------|--------------|
| 1  |             |                      |              |              |
| 2  |             |                      |              |              |
| 3  |             |                      |              |              |
| 4  |             |                      |              |              |
| 5  |             |                      |              |              |
| 6  |             |                      |              |              |
| 7  |             |                      |              |              |
| 8  |             |                      |              |              |
| 9  |             |                      |              |              |
| 10 |             |                      |              |              |
| 11 |             |                      |              |              |
| 12 |             |                      |              |              |
| 13 |             |                      |              |              |
| 14 |             |                      |              |              |
| 15 |             |                      |              |              |
| 16 |             |                      |              |              |
| 17 |             |                      |              |              |
| 18 |             |                      |              |              |
| 19 |             |                      |              |              |
| 20 |             |                      |              |              |
| 21 |             |                      |              |              |
| 22 |             |                      |              |              |
| 23 |             |                      |              |              |
| 24 |             |                      |              |              |
| 25 |             |                      |              |              |
| 26 |             |                      |              |              |
| 27 |             |                      |              |              |
| 28 |             |                      |              |              |
| 29 |             |                      |              |              |
| 30 |             |                      |              |              |