ACHIEVEMENT LEAGUE Believe It, Achieve It! Barron.

Team Name:		Gym Phone: () -
Main Contact:	Email:		
Coach Name and Cell:		/() -	
CHECK MEET DATE ENTERING:	December January February	er 3 - ACHIEVEMENT (I er 15 - ACHIEVEMENT (Du 12 - ACHIEVEMENT (Du 9 - ACHIEVEMENT (Du &9 - CHAMPIONSHIPS	(Due Nov. 15) ue Dec. 12) ue Jan. 9)
Gymnast Name (Please Print)		Level	Date of Birth
1			
2			
3 4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
ACHIEVEMENT MEETS (NOV., DEC., JA	AN., FEB.) \$52 x	(# of gymnasts) = <mark>\$</mark>	Total Due
	CHAMPIONSHIPS	ONLY	
ENTRY FEE: \$88 x (#	of gymnasts) = \$	Sub Total	
TEAM ENTRY FEE: \$45 x (#	of teams) = \$	Sub Total	
LEVEL 1LEVEL	2LEVEL 3	BRONZESILVER	GOLD
		\$ <u></u>	Total Due

Return to: Barron Gymnastics, 5411 Jedmed Ct., St. Louis, MO 63129 (314) 892-6909 / Checks to "Barron Gymnastics" League Director: Melissa Barron - melissa@barrongymnastics.com