NC USA GYMNASTICS ATHLETE REGISTRATION FORM
($12 per gymnast for those competing in a 2010-2011 sanctioned meet)
($6 per gymnast competing in a sanctioned Level 1-3 meet)

Club Name _____ **Club USAG Number** _____

Address _____

Phone _____ **Fax** _____

E-mail address _____

Contact person _____

Please mail this form (or your form with needed information) and one check per club to NC USAG, 86 Rollo Road, Grantsboro, NC 28529
NC Registrations may be sent between August 2008 and season ending State Meets.

Name	Age as of last day of season ending State Meet	Proposed competitive level

Total Number of Gymnasts _____ **Check #** _____ **Check total** _____