

Cardholder Signature: ___

4th Annual Orlando Holiday Classic **Entry Form** December 15-17, 2023



Lake Mary, FL 32746

Carrie Rawlings - Meet Director / Event Coordinator carrie.rawlings@orlandometrogyms.com (407) 333-0907

Registration Deadline: November 1, 2023

| Te | eam Name | :: | | USAG Club#: | | | | |
|--|------------|--------------|-----------|--|-----------|--------------|-------------------|-------|
| St | reet Addre | ess: | | | | | | |
| | | | State: _ | | Phor | ne: | | |
| Eı | mail Conta | nct: | | | | | | |
| Coach Name USAG Pro # | | | USAG Pro# | Coach Name | | | USAG Pro# | |
| | | | | | | | | |
| | | | | | | | | |
| # | Leo Size | Athlete Name | | | Birthdate | USAG | # / AAU# | Level |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
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| 9 | | | | | | | | |
| 10 11 | | | | | | | | |
| <u></u> 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| All fees must accompany entry fo | | | | rm: Level 1-5, Xcel B,S | | | \$120.00 = | |
| | | | | Level 6-10, Xcel G,P, D | | x \$140.00 = | | |
| Teams 1 2 3 4 5 6 7 8 | | | | 9 10 XB XS XG XP XD XSP | | , | x \$75.00 = | |
| Credit Card Payment Option (additional 4.5% fee) | | | | (Circle all that apply) | | | | |
| Card #: | | | | TOTAL Entry Fees due = | | | | |
| Exp Date: | | | | Make Club Check Payable: Orlando Metro Gymnastics | | | | |
| Cardholder Name: | | | | Send Entry to: Orlando Metro Gymnastics 1180 Emma Oaks Trail | | | | |
| Cardholder Signature | | | | | | | | |