

ENTRY RECAP FORM

Twistars USA 12th Annual Invitational January 11-13, 2008

Please return this form, the Competition Registration Form(s) and your check by November 16th, 2007. Make checks payable to: Twistars Booster Club. Payment is due at the time of registration. Gymnasts will not be considered registered until payment and all required gymnast information is received. To be considered a Team, the team fee must be included. No refunds after December 10th, 2007. All Refunds must be requested in writing, by fax or email.

Club Name: _____ Club Name: _____

Gym Address: Street _____ Gym Address: _____
City _____ State _____ Zip _____

Phone: _____ Fax: _____ E-mail: _____

* Women's Level 4-6 teams consist of 5 gymnasts/4 scores count
 ** Women's Level 7-10/open teams consist of 4 gymnasts/3 scores count
 *** Men's teams consist of 3 gymnasts

WOMEN'S ARTISTIC

Prep-opt level # _____ X \$50.00 = _____
 Number of Level 4 gymnasts # _____ X \$60.00 = _____
 Number of Level 5 gymnasts # _____ X \$75.00 = _____
 Number of Level 5 Teams # _____ X \$45.00 = _____
 Number of Level 6 gymnasts # _____ X \$75.00 = _____
 Number of *Level 6 Teams # _____ X \$45.00 = _____
 Number of Level 7 gymnasts # _____ X \$85.00 = _____
 Number of *Level 7 Teams # _____ X \$45.00 = _____
 Number of Level 8 gymnasts # _____ X \$95.00 = _____
 Number of **Level 8 Teams # _____ X \$45.00 = _____
 Number of Level 9 gymnasts # _____ X \$95.00 = _____
 Number of **Level 9 Teams # _____ X \$45.00 = _____
 Number of Level 10/O gymnasts # _____ X \$95.00 = _____
 Number of **Level 10 Teams # _____ X \$45.00 = _____

Total Women's Entry Fee = _____

MEN'S

Prep-opt level # _____ X \$50.00 = _____
 Number of Level 4 gymnasts # _____ X \$60.00 = _____
 Number of Level 5 gymnasts # _____ X \$60.00 = _____
 Number of Level 5 Teams # _____ X \$45.00 = _____
 Number of Level 6 gymnasts # _____ X \$70.00 = _____
 Number of *Level 6 Teams # _____ X \$45.00 = _____
 Number of Level 7 gymnasts # _____ X \$70.00 = _____
 Number of *Level 7 Teams # _____ X \$45.00 = _____
 Number of Level 8 gymnasts # _____ X \$70.00 = _____
 Number of **Level 8 Teams # _____ X \$45.00 = _____
 Number of Level 9 gymnasts # _____ X \$70.00 = _____
 Number of **Level 9 Teams # _____ X \$45.00 = _____
 Number of Level 10/O gymnasts # _____ X \$70.00 = _____
 Number of **Level 10 Teams # _____ X \$45.00 = _____

Total Men's Entry Fee = _____

GRAND TOTAL = _____

Mail Registration Form(s) and this Entry Recap Form To:
 Geddert's Twistars Invitational Registration
 Attention: Michelle Hill
 9410 Davis Hwy.
 Dimondale, MI 48821
 Fax: 517-322-0882