Hunts' Gymnastics Academy
Meet Registration Form

Club Number:

Team Name:

Team Address:

City: **State:** **Zip:**

Phone: **e-mail:**

Primary Contact: **fax:**

Level	Number of Gymnasts	Entry Fee	Team Fee	Total
Fun Meet				

Coaches

Last Name	First Name	USAG #	Safety Certification Expiration Date

Gymnasts

Last Name	First Name	USAG #	Age Group	Level	Date of Birth

Mail entries to:
MEET REGISTRATION
40875 Irwin
Harrison Twp., MI 48045

Questions: 586-954-3300