



UNITED STATES ASSOCIATION OF
INDEPENDENT GYMNASTICS CLUBS

• INTERNATIONAL ASSOCIATION OF INDEPENDENT GYMNASTICS CLUBS •

USAIGC / IAIGC 2014 Team Cup Entry Form

February 7-9, 2014

Host Site: Gym Nest, Long Island, New York

A TRUE TEAM COMPETITION!

Think College Gymnastics! NO Individual Event Awards.
Bring Your Team Banners, Signs, Gymnasts Paint Your Faces.

Entry Deadline: January 24

Entry Fees

- \$75.00 per gymnast - two judge panels
- \$18.50 per event (gymnast not competing on 4 events)
- \$50.00 Team Banner Fee per level
- Entry fees includes one Team Cup Program per gymnast
- Team Cup Entry Forms Mailed or Faxed to:
 - USAIGC, 450 North End Avenue - 20F, New York, NY 10282
phone: 212.227.9792 fax: 212.227.9793
Checks made out to USAIGC, Credit Card Payment Accepted

Host Hotel - TBA

Team Size Divisions Per Level created after deadline

- Small Team: 3 scores count per event
- Medium Team 6 scores count per event
- Large Team 9 scores counting per event
- Platinum & Premier Gymnasts form one Team.
- Mixed Team Levels possible.

Awards

- USAIGC Team Cup Trophy for each Gymnast
- USAIGC Team Cup Banner for each Team per size division based on Team Ranking

Coaches

Gymnasts do not have to compete on all four events. AA Gymnasts may compete one level up on no more than two competitive events. Coaches will create competition line-ups for each event. USAIGC warm-up and compete format by Team.

The Team Cup counts as one of the three/two competitions required prior to the State/Regional Championship. All-Around & Individual Event Scores count for to State/Regional Qualification.

CLUB _____

ADDRESS _____

CITY/PROVINCE _____ STATE _____ ZIP _____

COUNTRY _____

Gymnast Name	IGC Number	Level	Age*	AA	Ind. Event

- Age as of the Day of Competition - duplicate entry form

Club Fees:

Number AA Gymnasts _____ X \$75 = _____

Number Individual Events _____ X \$18.50 = _____

Team Banners (minimum 3 gymnasts per team level) _____ X \$50 = _____

Total Due USAIGC _____

Credit Card Information

Card Member Name: _____

Address _____

City _____ State _____ Zip _____

Card Number _____ Exp. Date _____

Signature Card Holder _____

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USAIGC, 450 North End Avenue - Suite 20F, N.Y, N.Y. 10282
Credit Card Payment Form (CC run 10 days before competition)