



UNITED STATES ASSOCIATION OF  
INDEPENDENT GYMNASTICS CLUBS

• INTERNATIONAL ASSOCIATION OF INDEPENDENT GYMNASTICS CLUBS •

## **USAIGC 2014 HIGH SCHOOL INVITATIONAL**

**January 11-12, 2014**

**Host Site: New Image Gymnastics, Long Island, New York**

OUR NEWEST Competitive Event that is an **age specific and multi-competitive** level competition **only** for **High School Gymnasts**.

Each USAIGC Club creates a "High School Gymnastics Team" from **any** of our USAIGC Competitive Levels. The Gymnasts compete on their USAIGC Competitive Level and their individual event score(s) count toward their High School Team Score! The Team Score will be a pre-designated number of scores (highest) per event regardless of level that will count for a High School Team Score.

### **Rules**

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

### **Awards**

- USAIGC Team Cup Trophy for each Gymnast
- USAIGC Team Cup Banner for each Team

### **Entry Fee\***

- \$70.00 per gymnast - two judge panels
- \$16.50 per event if the gymnast is not competing on 4 events
- \$50.00 High School Team Banner
- \*entry fees include one Team Cup Program per gymnast

*The USAIGC High School Invitational counts as one of the three competitions required prior to the State/Regional Championship and all Individual Event Scores and AA scores count for State/Regional Qualification.*

**CLUB** \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/PROVINCE \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

<b>Gymnast Name</b>	<b>IGC Number</b>	<b>Level</b>	<b>HS Grade</b>	<b>AA</b>	<b>Ind. Event</b>

- Must be a High Student Freshman, Sophomore, Junior or Senior

**Entry Fees:**

Number AA Gymnasts \_\_\_\_\_ X \$65 = \_\_\_\_\_

Number Individual Events \_\_\_\_\_ X \$17.50 = \_\_\_\_\_

Team Banner: \$50 per Club

Total Due USAIGC \_\_\_\_\_

**Credit Card Information**

Card Member Name: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature Card Holder \_\_\_\_\_

**Team Cup Entry Forms Mailed or Faxed to: 212-227-9793**

**USAIGC, 450 North End Avenue - Suite 20F, N.Y, N.Y. 10282**

**Credit Card Payment Form (CC run 10 days before competition)**