Land of OZ 2012 Entry Form

Wichita Gymnastics Club • 9400 E. 37th St North
Wichita, KS 67226 • 316.634.1900
www.wichitagym.com

RETURN BY JANUARY 14 TO:

*Please return to WGC - the **entry deadline is January 14.** Looking forward to seeing you in February!*

Club Name_____Contact _____

Address:_____City_____State_____Zip_____

Phone:(_____)_____Fax:(_____)_____Email_____

Coaches Name:_____USAG #_____Safety Exp Date_____

Coaches Name:_____USAG #_____Safety Exp Date_____

Coaches Name:_____USAG #_____Safety Exp Date_____

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Coaches Name:_____USAG #_____Safety Exp Date_____

Name	USAG#	Level	Age: Day of Meet	Birth Date

# of AAU:_____x $45.00=_____

# of Level 4s:_____x $55.00=_____

Make checks payable to WGBA

# of Level 5s:_____x $75.00=_____

# of Level 6s:_____x $75.00=_____

# of Optional:_____x $85.00=_____

Teams Entered: L4_____ L5_____ L6_____L7_____L8_____ L9_____ L10___ X $30.00=_____

Total Entry $_____Check #_____Date_____