



North Carolina AAU Gymnastics

Invitational Registration Form



**Please Print Legibly*

Club Name:	
Contact:	
Email Address:	
Phone #:	
Alternate #:	
Fax #:	
Address:	
Coaches Name	AAU #

**Please enter gymnasts according to:
Level – lowest to highest & Birthday (mm/dd/yyyy) – youngest to oldest*

Gymnast Name	Level	Birthday	Highest AA	AAU #
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Total Gymnasts _____	x \$45.00 = _____
Total Levels _____	x \$30.00 = _____ <i>*(If Applicable)</i>
TOTAL= _____	

**\$30 Team Fee per level entered only for meets with Team Competition offered.*