

**PROVISIONAL ENTRY**

*This entry must be returned to the Organizing Committee by 1 April 2009*

Country / Club: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Delegation Information** – indicate the number of each position in your delegation

Head of Delegation: \_\_\_\_\_ Judge: \_\_\_\_\_

Team Manager: \_\_\_\_\_ Coach: \_\_\_\_\_

Physiotherapist: \_\_\_\_\_ Additional Visitors: \_\_\_\_\_

AGAGC WP: \_\_\_\_\_ JUNIOR WP: \_\_\_\_\_

AGAGC MP: \_\_\_\_\_ JUNIOR MP: \_\_\_\_\_

AGAGC MXP: \_\_\_\_\_ JUNIOR MXP: \_\_\_\_\_

AGAGC WG: \_\_\_\_\_ JUNIOR WG: \_\_\_\_\_

AGAGC MG: \_\_\_\_\_ JUNIOR MG: \_\_\_\_\_

SENIOR WP: \_\_\_\_\_ SENIOR MP: \_\_\_\_\_

SENIOR MXP: \_\_\_\_\_ SENIOR WG: \_\_\_\_\_

SENIOR MG: \_\_\_\_\_

WORLD CUP WP: \_\_\_\_\_ WORLD CUP MP: \_\_\_\_\_

WORLD CUP MXP: \_\_\_\_\_ WORLD CUP WG: \_\_\_\_\_

WORLD CUP MG: \_\_\_\_\_

**Travel Itinerary**

Airport: \_\_\_\_\_ Number of people: \_\_\_\_\_

ARRIVAL: Airline and Flight No.: \_\_\_\_\_ Date / Time: \_\_\_\_\_

DEPARTURE: Airline and Flight No.: \_\_\_\_\_ Date / Time: \_\_\_\_\_

\_\_\_\_\_  
Official Signature, Date

**FAX COMPLETED FORM BY 1 APRIL 2009 TO:  
USA GYMNASTICS - ATTENTION: TOM HOUSLEY FAX: +1 317 237 5069**

**2005 Freedom Cup – 14-19 November 2005**

