



2009 Acrobatic Gymnastics J.O. National Championships Payment Form

Print or type all information, except where signature is required.
One form per club.

Entry fees must be postmarked by **Friday, May 22, 2009** (Early registration deadline) or
Friday, June 12, 2009 (Late registration deadline)

Name of Club: _____ Club #: _____

Coach Contact: _____ Pro #: _____

Parent Liaison: _____ Email: _____

Arrival Date: _____ **Arrival Time:** _____

ENTRY FEE:		
Early Registration:	Friday, May 22	First Event: \$115 Additional Event: \$60
Late Registration:	Friday, June 12	First Event: \$140 Additional Event: \$80

Payments can be made by check or credit card. Checks are to be made payable to **USA Gymnastics** and mailed to the address below.

Check #: _____ Amount: _____

Please complete the information below if paying by credit card.

Amount: _____

Card Type: Visa Discover MasterCard AMEX

Exp. Date: ____/____/____ Card #: _____

Billing Address: _____

Phone Number: _____

Signature of Cardholder: _____

Printed Name: _____

**Mail or fax Form and Fee to (Please include a copy of the online registration summary): USA Gymnastics – Acrobatic Gymnastics, 132 E. Washington St., Suite 700, Indianapolis, IN 46204
Fax: 317-237-5069**