Harvest Invitational

October 13-14, 2007 @ North St. Paul High School
Hosted By: Rising Stars Gymnastics Academy
Phone: 651/730-4376 ** Fax: 651/731-1215 ** Email: meet@risingstarsgym.com
Entry Deadline is September 15, 2007 * No refunds after deadline

Gym Name: _____ Club #:_____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Coach Name: _____ USAG #_____ Safety Cert? **Y / N**

Coach Name: _____ USAG #_____ Safety Cert? **Y / N**

Coach Name: _____ USAG #_____ Safety Cert? **Y / N**

Level	Competitor	USAG #	Age	Date of Birth	T-Shirt Size
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(If you need more room, please copy this form)

of **Level 4** Gymnasts _____ x $55.00 = _____ + **Level 4** Team Entry Fee ($45.00) = _____

of **Level 5** Gymnasts _____ x $60.00 = _____ + **Level 5** Team Entry Fee ($45.00) = _____

of **Level 6** Gymnasts _____ x $60.00 = _____ + **Level 6** Team Entry Fee ($45.00) = _____

Please mail completed entry to: Rising Stars Gymnastics Academy at 520 Hayward Avenue North – Oakdale, MN 55128
Make checks payable to Rising Stars Gymnastics Academy.
Please note: Gymnasts will not be registered until payment is received.
PLEASE MAKE SEPARATE CHECKS FOR HARVEST INVITATIONAL AND RISING STARS INVITATIONAL.