

# Harvest Invitational

October 10-11, 2009 @ North St. Paul High School

Hosted by: Rising Stars Gymnastics Academy

Phone: (651) 730-4376 Fax: (651) 731-1215 or email: meet@risingstarsgym.com

**Entry Deadline is September 10, 2009, or until meet is full \* No Refunds after deadline**

Gym Name: \_\_\_\_\_ Club #: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Coach Name: \_\_\_\_\_ USAG# \_\_\_\_\_ Safety cert exp date \_\_\_\_\_

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	Competitor	Level	USAG #	Date of Birth	Age	T-Shirt Size			
1						CS	CM	CL	AS
2						CS	CM	CL	AS
3						CS	CM	CL	AS
4						CS	CM	CL	AS
5						CS	CM	CL	AS
6						CS	CM	CL	AS
7						CS	CM	CL	AS
8						CS	CM	CL	AS
9						CS	CM	CL	AS
10						CS	CM	CL	AS
11						CS	CM	CL	AS
12						CS	CM	CL	AS
13						CS	CM	CL	AS
14						CS	CM	CL	AS
15						CS	CM	CL	AS
16						CS	CM	CL	AS
17						CS	CM	CL	AS

(If you need more room, please copy this form)

#of **Level 4** Gymnasts \_\_\_\_\_ x \$55.00 \_\_\_\_\_ + **Level 4** Team Entry (\$45) = \_\_\_\_\_

#of **Level 5** Gymnasts \_\_\_\_\_ x \$65.00 \_\_\_\_\_ + **Level 5** Team Entry (\$45) = \_\_\_\_\_

#of **Level 6** Gymnasts \_\_\_\_\_ x \$65.00 \_\_\_\_\_ + **Level 6** Team Entry (\$45) = \_\_\_\_\_

Mail Completed Entry to: Rising Stars Gymnastics Academy – 520 Hayward Ave. N. – 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**