



2012 KEYSTONE GYMNASTICS CHAMPIONSHIP TEAM ENTRY APPLICATION



TEAM NAME: _____

TEAM CONTACT: _____ PHONE:(_____)_____

ADDRESS: _____ CITY/ST/ZIP _____

EMAIL: _____ TEAM COACH (If different than above)_____

	First Name	Last Name	Level	Birthdate	Age
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Please use a different form for each level you would like to enter

Please complete a Team Entry Application form for each team you are entering into the tournament. If entering multiple teams, you may combine entry fees and write one check for the overall cost. All checks are to be made out to: Keystone State Games, Inc

Please send Entry Fee(s) & Team Entry form(s) to: Keystone State Games, PO Box 1166, Wilkes-Barre, PA 18703