

TIGER ACADEMY OF GYMNASTICS

MEET ENTRY FORM

DUE DATE: JULY 10, 2017

DUE DATES ARE FINAL. THERE WILL BE NO LATE ENTRIES ACCEPTED.

MEET: **SHOW ME STATE GAMES**

MEET LOCATION: **HEARNES CENTER, COLUMBIA, MO**

MEET DATES: **SATURDAY, JULY 29, 2017**

GYMNAST NAME: _____

MEET ENTRY FEE: Please indicate competition level.

	Level 3	\$65
	Level 4	\$65
	Level 5	\$65
	Level 6	\$65
	Level 7	\$65
	Level 8	\$65
	Level 9	\$65

IMPORTANT NOTE: All competitors at any Show Me State Games event, are required to complete and submit the attached waiver. Tiger parents please complete Section 1 – Athlete Information and Section V – Waiver **AND ATTACH TO THIS MEET ENTRY FORM.**

Indicate how payment for this meet entry is to be made. (Note: all account balances are verified before a gymnast is entered into a meet. Accounts not having sufficient balance will result in the gymnast not being entered into the meet.)

____ A deposit has been made today to my booster account to cover this amount.

____ Payment can be made from my Booster Account – I have confirmed and know that my account balance will cover the amount of this meet entry fee. (Any questions, regarding balance of a gymnast’s booster account can be directed to Stacy at silverwoods6@gmail.com)

Parent Signature: _____



2017 SHOW-ME STATE GAMES ENTRY FORM / WAIVER



Please use a separate entry form if entering more than one sport.
If entering a team, you must also submit a team roster.

1 ATHLETE INFORMATION (Please print all information)

Last _____ First _____ M
 Street _____
 City _____ State _____ Zip _____
 Phone _____ Sex (Circle M F) Date of Birth _____ Age _____
 Email _____

2 SPORT INFORMATION (One sport per Entry Form / Entry Form may be copied)

- Archery- 3D
- Archery- Target
- Archery- MoNASP
- Baseball
- Basketball
- Bowling
- Cycling
- Disc Golf
- Fencing
- Football (7v7 Flag)
- Youth Football
- Golf
- Golf - Par 3
- Miniature Golf
- Mountain Biking
- Pickleball
- Powerlifting
- Road Race / Race Walk
- Rugby
- Shooting
- Soccer
- 3v3 Soccer
- Softball
- Swimming
- Synch. Swimming
- Table Tennis
- Tennis
- Track and Field
- Triathlon / Duathlon
- Ultimate
- Volleyball
- Wrestling
- _____

3 EVENT INFORMATION (See sport pages for event codes and description)

Team Name (Team sports only)		Coach's Name (Team sports only)	
Event Code(s)	Event Description	Partner's Name	Swim Times / USBC # & Bowl Avg / Pickleball Skill Rating

4 WAIVER

WAIVER OF LIABILITY AND CONSENT FOR MEDICAL TREATMENT

In consideration of my entry into the competition known as the SHOW-ME STATE GAMES, I, intending to be legally bound do hereby for myself, executors and administrators waive, release and forever discharge any and all rights and claims for damages, including any claims for loss, damages or injury to my person or property arising out of my performance or failure of performance, from the State of Missouri, the Governor's Council on Physical Fitness and Health, the National Sports Governing bodies, the Curators of the University of Missouri, referees, referee assignors, referee organizations, the owner of the sit of any festival or finals competition I may be participating in, their agents, representative, successors and assigns.

CONSENT FOR MEDICAL TREATMENT

I, the undersigned, also hereby authorize and consent to any first aid, medication, medical treatment or surgery deemed necessary in case of an emergency.

Parent or Guardian signature if athlete is under the age of 18

Sign

Date

EMERGENCY CONTACT PERSON

Name

Home

Phone Work Phone

5 PAYMENT INFORMATION

- Check (SS# required) _____ . _____
- Money Order Donation: \$ _____ . _____
- Master Card _____ . _____
- Visa Late _____ . _____
- Discover Total Amount: \$ _____

Entry _____
 Credit Card

 Expiration

 Signature

Fee: \$
 \$