

# WOMEN'S ARTISTIC GYMNASTICS AGF L.E.A.P. EVENT

West Wind Gymnastics Club  
June 19<sup>th</sup>-20<sup>th</sup>, 2010

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**WHO:** L.E.A.P. Athletes and Coaches  
All AGF Coaches and Judges

**WHERE:** **West Wind Gymnastics Club**  
**1101 3<sup>rd</sup> Avenue North**  
Lethbridge, Alberta  
(403) 320-1373  
*Club Contact: Katrina Burton*

**WHEN:** Saturday June 19<sup>th</sup>-20<sup>th</sup>, 2010

**ATHLETE FEE:** \$30 per athlete, per component

## REGISTRATION

**DEADLINE:** *Friday May 28<sup>th</sup>, 2010*

## SCHEDULE:

### Saturday June 19<sup>th</sup> Skills

Warm up 2:00pm  
March in 2:30pm  
Awards to follow testing

### Sunday June 20<sup>th</sup> Physical Abilities

Warm up 11:00am  
March in 11:30am  
Awards to follow testing



**WOMEN'S ARTISTIC GYMNASTICS  
SKILLS REGISTRATION FORM**

AGF L.E.A.P. Event  
West Wind Gymnastics Club  
June 19<sup>th</sup>-20<sup>th</sup>, 2010



Club Name: \_\_\_\_\_

Address: \_\_\_\_\_

Club Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Registration Fees:            # of athletes            \_\_\_\_\_ @ \$30.00 each = \$ \_\_\_\_\_

TOTAL = \$ \_\_\_\_\_

**Registration Deadline: Friday May 28<sup>th</sup>, 2010**

Name of Athlete	D.O.B. (DD/MM/YY)	Most Recent Skill Level Passed				Level Registered for this Test				Is athlete being tested for pin at this event (at this component) ?	
		C	B	S	G	C	B	S	G	Yes	No

*PLEASE NOTE: If your registration AND payment have not been received by the stated deadline your registration may not be accepted. If AGF authorizes a late registration an administration fee of \$20.00 will be applied.*

MasterCard  Visa  Cash  Cheque  (#) \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp Date: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_ Signature: \_\_\_\_\_

Return to: Alberta Gymnastics Federation. #207, 5800 – 2<sup>nd</sup> Street S.W., Calgary T2H 0H2  
FAX: (403) 259-5588 ATTENTION: CHRISSY WARWICK

**WOMEN'S ARTISTIC GYMNASTICS  
PHYSICAL ABILITIES REGISTRATION FORM**

AGF L.E.A.P. Event  
West Wind Gymnastics Club  
June 19<sup>th</sup>-20<sup>th</sup>, 2010



Club Name: \_\_\_\_\_

Address: \_\_\_\_\_

Club Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Registration Fees:            # of athletes            \_\_\_\_\_ @ \$30.00 each = \$ \_\_\_\_\_

TOTAL = \$ \_\_\_\_\_

**Registration Deadline: Friday May 28<sup>th</sup>, 2010**

Name of Athlete	D.O.B. (DD/MM/YY)	Most Recent P.A. Level Passed				Level Registered for this Test				Is athlete being tested for pin at this event (at this component) ?	
		C	B	S	G	C	B	S	G	Yes	No

*PLEASE NOTE: If your registration AND payment have not been received by the stated deadline your registration may not be accepted. If AGF authorizes a late registration an administration fee of \$20.00 will be applied.*

MasterCard  Visa  Cash  Cheque  (#) \_\_\_\_\_

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