

<u>FLIP</u> ~ AAU INVITE AAU Level 1-2-3-4-5-6-7-8-9 & All Xcel Levels Saturday & Sunday February 13th & 14th, 2016

<u>Meet Site:</u> Gale-Ettrick-Trempealeau High School; Galesville, WI <u>Host Club:</u> Blue Angels Gymnastics Club License #:

Entry Deadline: January 25th, 2016. One check per club payable to BAGC. *Individual Entry Fee:* \$40 per gymnast, all levels.

- *Team Fee:* \$30.00 per level/team. Three scores count per level. Every team registering 3 gymnasts per level will automatically be entered for team competition.
- **LATE FEE:** If room allows to add individuals and/or teams there will be a \$5.00 late fee added per individual and level/team. Please email LeaAnn asap to find out about adding. **Email entries will only be valid if payment is postmarked the same day as Email is received.

Meet Schedule: Will be determined after entry deadline.

<u>Awards:</u> All-Around

We have a separate awards area that allows for great photo opportunities. Medals $1^{st} - 3^{rd}$ events and Trophy's for all-around for all gymnasts. 100% awards for all events all levels/ages.

<u>*Meet Format*</u>: **Modified Capital Cup Format = warm-up/compete etc.

Admission: Adults \$5.00; Kids/students (age 5 up) \$3.00

Concessions and leotards will be available all day. NO CARRY INS. Thank you.

** Gymnasts must be AAU registered.

Coaches on the coaching floor must be AAU registered.

** To register and get your AAU membership please go to www.aausports.org **Complete list of AAU routines can be found at www.aausports.org go to gymnastics then rules. Please remember this is an AAU meet not USAG. AAU only uses USAG as guidelines. WI uses the AAU National routines.

> ** Send registration & Fee to:Blue Angels Gymnastics Club C/O: LeaAnn Bohn 20256 West Mill Road Galesville, WI 54630



- FLIP ~ AAU INVITE AAU Level 1-2-3-4-5-6-7-8-9, Ladies, & All Xcel Levels Saturday & Sunday February 13th & 14th, 2016

Recommended Hotel:

Stoney Creek Inn Onalaska WI Has a pool area with an indoor/outdoor swim through pool. Complimentary Full expanded Continental breakfast; fresh coffee 24 hours a day. Lots of shopping and restaurants right there.

Reservations: 1-800-659-2220 Direct to Onalaska Stoney Creek Inn: (608)781-3060

Driving Directions to Stoney Creek Inn: From interstate 90 take exit 5; take hwy 16 west to South Kinney Coulee Road (At the stop lights turn left). Stoney Creek is located just ahead.

Directions to Galesville: from LaCrosse/Onalaska: Interstate 90 west. Take exit 4 onto 53/35 North. Travel 15 miles to Galesville. To get to the GET High School for the rules interp. meeting and judges sessions: at the lights in Galesville veer to the right and travel into Galesville; go through town. The High School will be on your left across from Piggly Wiggly.

Driving Directions from River Falls/Winona/Eau Claire: Get on 35 South. You will go through Centerville then 6 miles to Galesville. At the lights turn left into Galesville. Go down mail street to the G-E-T High School on your left across from Piggly Wiggly.

• Registration next page *

This event is licensed by the Amateur Athletic Union of the U.S., Inc.

All participants must have a current AAU membership.

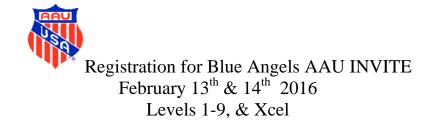
AAU membership may not be included as part of the entry fee to the event.

AAU Youth Athlete membership must be obtained before the competition begins.

BE PREPARED! Adult and Non Athlete memberships are no longer instant and cannot be applied for at event.

Please allow at least 10 days for membership to be processed.

Participants are encouraged to visit the AAU website <u>www.aausports.org</u> to obtain their membership.



Club Name:______AAU Club Number:_____ Phone number of contact person: ______ Email: (Final meet schedule information to be sent to this email):

Club Address:		
<i>City:</i>	State:	Zip:
Coaches Attending Comp	petition: (Must be AAU Regi	istered).
Name	AA	<i>U</i> #
Name	AA	U#

ENTRIES MUST BE RECEIVED BY January 25th, 2016. \$40 per gymnast/all levels Late registration fee: \$5.00 additional per athlete for entries postmarked after January 25th, 2016.

First Name	Last Name	AAU #	Birthdate	Age on 2/13/16	AAU Level	
Total Gymnasts	X \$40 =		(Please dup)	icate this pag	o for	

Total GymnastsX \$40 =(Please duplicate this page for
additional entries).

Please circle the levels where you have 3 or more gymnasts per level: 1-2-3-4-5-6-7-8-9-1 lady's --Xcel --- X \$30 = _____

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