

Monster Bash

Level 3, 4, & Prep Optionals Missouri State Qualifier
Non-sanction Levels 1 - 5

Date: October 24-25, 2009

Meet Site: Dynamics Gymnastics

2100 E Pythian
Springfield, MO 65802

E-mail: dynamicsgymnastics@yahoo.com
417-890-0946 Gym

417-868-8141 Fax

Erin Strobel – Meet Director

Kara Pagel -- Other Contact



Deadline: Entry Deadline is September 21, 2009
Must be accompanied with USAG # and payment
\$10.00 late fee per athlete after 9/21 if space
permits

| | | | |
|--------------------|-----------------------|---|----------------|
| Entry Fees: | Level 3 | - | \$30.00 |
| | Level 4 | - | \$45.00 |
| | Prep Optional- | | \$55.00 |
| | Non-sanction - | | \$40.00 |

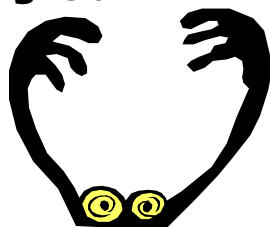
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|-------------------|------------------|---|----------------|
| Team Fees: | Per Level | - | |
| | | | \$35.00 |

| | | | |
|-------------------|-----------------------|---|---------------|
| Admission: | adult | - | \$5.00 |
| | Child (6-18yr) | - | \$3.00 |



Host Hotel

Doubletree Hotel Springfield
2431 N Glenstone Ave
Springfield, MO 65803
Tel: 417-831-3131
\$ 89.00 per night



**Meet Format: Modified
Tradition**

**Awards: Achievement
ribbons and plaques for
all participants. Trophies
for team awards.**

Monster Bash

Dynamics Gymnastics Level 3, 4, & Prep Optionals State Qualifier, and Non Sanctioned Levels 1-5.

Entry Deadline September 21st

Team Entry Summary

Team Name _____ **USAG#** _____

Street Address _____

City, State, Zip _____ **Phone #** _____

Email Address _____

Coach name _____ **USAG#** _____

Coach name _____ **USAG#** _____

Coach name _____ **USAG#** _____

Note: Coaches must be registered on the entry form and have their USAG# and card available at meet in order to be on competition floor.

Level 3 Gymnasts _____ @ **\$30** = _____
Level 3 Team _____ @ **\$35** = _____

Level 4 Gymnasts _____ @ **\$45** = _____
Level 4 Team _____ @ **\$35** = _____

Prep Optional Gymnasts _____ @ **\$55** = _____
Prep Op Team _____ @ **\$35** = _____

Non Sanctioned Gymnasts _____ @ **\$40** = _____
Non Sanctioned Teams _____ @ **\$35** = _____

Please indicate Non sanctioned levels to include in team competition

1 2 3 4 5

Total amount due = \$ _____

Total amount Enclosed = \$ _____

Please make checks payable to Dynamics Gymnastics

You may email your entries to dynamicsgymnastics@yahoo.com

Or by mail

**Dynamics Gymnastics
2100 E. Pythian
Springfield, MO 65802**