

# Region 2 TnT Benefit Camp

## Entry Form

Woodward West, September 5-7, 2009

Please complete one form per family consisting of athletes attending or one form per club consisting of personal coaches attending. **USAG # is required!!!**

Gym Name \_\_\_\_\_

Gym Email Address \_\_\_\_\_

Gym Phone \_\_\_\_\_

Gym Contact Person \_\_\_\_\_

Participant Name	age	M / F	Choose One		Competitive Level			USAG#	Email Address
			coach	athlete	TR	TU	DM		
1.									
2.									
3.									
4.									
5.									
6.									

Please indicate with \* if qualified to the Final Selection Event or a member of the Jr or Sr National Team

# Athletes \_\_\_\_\_ @ \$250 \$ \_\_\_\_\_

#Coaches \_\_\_\_\_ @ \$100 \$ \_\_\_\_\_

Total Enclosed \$ \_\_\_\_\_

Please make checks payable to [USGF Region 2 Trampoline](#)

**All checks will be cashed after the registration deadline of Friday, July 24, 2009**

Send Check and entry form to:

Karl Ziehn

18531 Mayall St. #F

Northridge, Ca. 91324

(510) 334-0674

zcraziness@yahoo.com