17th ANNUAL WHITFIELD INVITATIONAL – 2008

Site: Cliff Keen Arena, University of Michigan
1000 S. State Street
Ann Arbor, MI 48109-2201

Date: January 19-20, 2008
Sponsored by: The Jason Whitfield Foundation
E-mail: Branchgym1@aol.com

E-MAIL_____

TEAM_____PHONE_____FAX_____
ADDRESS_____CITY_____STATE_____ZIP_____
COACH_____USAG #_____Safety Cert. Exp._____CLUB #_____
COACH_____USAG #_____Safety Cert. Exp._____

GYMNAST NAME	USAG #	BIRTHDATE mm/dd/yy	AGE as of 9/1/07	LEVEL (4-10)	LEVEL 5-10 $60	LEVEL 4 $45	US Cit. Y/N

Team Fees: $50/Team (3 or more gymnast in same level)
Please check the appropriate levels

____Level 4
____Level 5
____Level 6
____Level 7
____Level 8
____Level 9
____Level 10
____ Elite

COMPETITOR ENTRY FEES: $_____

TEAM ENTRY FEES: $_____

TOTAL AMOUNT: $_____

Make checks payable to: JASON WHITFIELD MEMORIAL FOUNDATION
Mail to: Al Scharns, 393 N. Helmer Rd., Battle Creek Michigan 49037
All entries must be received by Friday, November 30th, 2007