



SPRING HAS SPRUNG

Invitational 2017

Date: April 29 & 30, 2017

Location: Gymtastiks of Moose Jaw
Hillcrest Sports Centre
1599 Main Street N. Moose Jaw, SK.S6J 1L5

Entry Fee: \$90.00 J.O. 3-7
\$60.00 J.O. 1 & 2
\$40.00 for Recreational

Payment can be made by one cheque, made payable to **Gymtastiks of Moose Jaw**. Please send a hard copy of your registration with all waivers and T Shirt Size for athletes & coaches. Each athlete registered by the deadline will receive a T Shirt. Late registrations will not be guaranteed a T Shirt. Please submit registrations via e-mail.

Registrations are due **Wednesday, March 23, 2017**. Registrations received after March 23rd will be subject to a \$25.00 late fee per athlete.

Refunds for medical reasons will be given, with a doctor's note, on or before April 17th, 2017. Gymnasts will be registered when both forms and payment have been received.

Judges: As per Gymnastics Saskatchewan Policy.

NOTE: Fines will be charged as per Gymnastics Saskatchewan policy for missing judges. **Fines MUST be paid before start of competition.**

Schedule: Schedule/Session groupings will be sent to registered participant Clubs.

Deadline: Deadline is **March 23rd, 2017**. Please do **not** send as PDF.

Awards: J.O. 1-7 As per Gymnastics Saskatchewan Policy.
Recreational – participation medal.

Inquiries: Barb Jesse
Phone: 306-692-2303
E-Mail: office@gymtastiks.com

Music: Compulsory music will be supplied
ACCESS TO THE GYM is from Main Street only!

ATHLETE WAIVER FORM

Name of Athlete: _____

PLEASE PRINT CLEARLY

GYMTASTIKS OF MOOSE JAW
SPRING HAS SPRUNG Invitational
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In consideration of your acceptance of my entry I, intending to be legally bound do hereby, for myself, my heirs, executors and administrators waive and release and forever discharge any and all rights and claims for damage which I may have or may hereafter accrue to me against the Gymnastics Saskatchewan Association, the organizers or their respective officers, agents, representatives and/or assigns for any and all damages which may be sustained and suffered by me in connection with my association with or entry in the above athletic meet or which may arise out of my traveling to or participating in and returning from said athletic meet.

Submission of your registration to the Gymtastiks Luck of the Irish Invitational constitutes your consent to collect, use, disclose and retain your personal information as is reasonable for Gymnastics Saskatchewan and the Gymtastiks Club for the following purposes:

Name, event results, programs, web site results and photo posting.

Athlete's Signature

(If 18 years of age or over)

Parent/Guardian

Date

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RECREATIONAL ROUTINE SHEET

Please list skills that will be performed; fill out a sheet for each athlete attending.
Please ensure skills are at the athlete's level.

ATHLETE NAME: _____

VAULT – CHOOSE FROM (Please indicate which one):

1. Squat on to 60 cm Box
2. Handstand fall to back on crash mat
3. Handspring to back on 110 cm mats, with Mini Tramp

BARS – 6 skills

BEAM – 6 skills (mount, 1 turn, 2 leaps or jumps, 1 scale or acro, dismount)

Floor – 6 skills (3 acros, 1 turn, 2 leaps or jumps)
