Can-Am Gymnastics Club TTG Invitational

February 18th - 19th, 2017

3702 Mitchelmore Ave. Saskatoon, Saskatchewan S7P 0B9 Phone: (306) 931-4031 Fax: (306) 931-4038

e-mail: canamttgdirector@sasktel.net

Location: Can-Am Gymnastics Club

(head north on Millar Ave, turn right onto 64th Street, left onto Mitchelmore Ave.)

Registration: \$55.00 Fast Cat & Provincial TTG (1 event)

\$85.00 Provincial TTG (2-3 events)

**cheques can be made payable to Can-Am Gymnastics

Entry deadline: Friday January 9th, 2017

Athletes will be considered registered when payment is received. Registration will be on a first paid, first registered basis. Refunds granted with a medical certificate. No refunds after February 10^{th} , 2017. Any registration received after January 9^{th} , 2017

is subject to a \$25.00/athlete late fee.

Schedule: (Tentative-subject to change, specific start times will be sent out after registration has been received)

Friday February 17th, 2017

5:00-7:00 Open Training

Saturday February 18th, 2017

8:00am Tumbling ALL LEVELS

DMT ALL LEVELS

Synchro ALL Levels

Sunday February 19th, 2015

8:30am Trampoline ALL Levels

1:00pm Fast Cat ALL LEVELS

ATHLETE WAIVER FORM

Name of Athlete:	
PLEASE PRINT CLEARLY	
Name of Event: CAN-AM GYMNASTIC February 18	S TTG INVITATIONAL th – 19 th , 2017
In consideration of your acceptance of my entry myself, my heirs, executors and administrators and all rights and claims for damage which I make the Gymnastics Saskatchewan Association, the representatives and/or assigns for any and all dame in connection with my association with or ent out of my traveling to or participating in and return	waive and release and forever discharge any ay have or may hereafter accrue to me against organizers or their respective officers, agents, amages which may be sustained and suffered by try in the above athletic meet or which may arise
Submission of your registration to the Can-Am of to collect, use, disclose and retain your person Saskatchewan and the Can-Am Gymnastics Clul Name, event results, programs, web site results	al information as is reasonable for Gymnastics b for the following purposes:
Athlete's Signature (If 18 years of age or over)	
Parent/Guardian	Date

PROVINCIAL TRAMPOLINE & TUMBLING REGISTRATION FORM

ub Name:	Name: Club Contact:							
ldress:		Phone:						
-Mail:				_				
NAME	M/F	AGE MM/YR	TRAMP LEVEL	TUMB LEVEL	DMT LEVEL	Synchro LEVEL	Synchro PARTNE	
Number of Athletes	ı	_X \$85.00 =	= \$_	(2 or more	events)	1	•	
Number of Athletes		_X \$55.00 =			,			
TOTAL FEES PAID		=	= \$	_				

FAST CAT REGISTRATION FORM

Club Contact:		
	Phone:	
	Club Contact:	

NAME	M/F	AGE YR	TRAMP LEVEL	TUMB LEVEL	DMT LEVEL

Number of Athletes	X \$55.00 =

TOTAL FEES PAID

= \$_____

Can-Am Gymnastics TTG Invitational **TTG JUDGES and COACHES** Registration Form

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