2016 STATE PRELIMINARY MEET ENTRY FORM

This form must be received by the meet director no later than **Monday**, **April 11**, **2016**. You may either send or FAX the entry form, but, <u>the principal's signature is required in order for this entry form to be valid</u>. If for any reason you do not plan to enter, please contact the meet director via email. **On the entry form**, **TYPE FIRST AND LAST NAMES of the competitors in the order they will appear.**

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BARS BEAM _____ 1 _____ 2_____2 3_____ 4 ______ 4 _____ VAULT FLOOR EXERCISE 1_____1___1_____1 2______2 3_____ 4 _____ ALL-AROUND **Substitutes: Teams Only** 2_____ Team _____ Coach's Cell #_____ Community Coach_____ Community Coach_____ I verify that all the gymnasts listed on the entry form have met the GHSA three (3) meet rule during the regular season, and have met the minimum score. Coach's Signature _____ Principal's Signature _____ Email Address _____