|  |
| --- |
| GYMNAST PASS NUMBERS |
|  |  |  |  |  |
| * This sheet must be completed and submitted to the programme coordinator (Gill McKee - gill@rugbygymnasticsclub.co.uk) at least 1 week before the competition (noon, 8/10/16).
* Gymnasts/coaches will not be permitted to make any changes to their passes once submitted, under any circumstances.
* ***Failure to submit pass numbers before the deadline will result in the club/gymnast being withdrawn from the competition.***
 |
|
|  |  |  |  |  |
| CLUB\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | COACH\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |  |  |
| Gymnasts name | Age Group/ M/F | Pass 1 number | Pass 2 number | Pass 3 number (short pass) |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|  |  |  |  |  |
|  |  |  |  |  |