## TeamGym – Hinckley Gym Club Level 6 and 5 Competition Entrance Form



Hosted by Hinckley Gymnastics Club

## Please complete and return this entry form to jack.duggan@british-gymnastics.org

## Competition details

|  |  |
| --- | --- |
| **Competition venue** | Leicester New College |
| **Estimated start time(s):** | 9:00am and 12:30pm | **Date(s):** | 02/12/2018 |
| **Competition organiser:** | Jack Duggan | 07584517635 | Jack.duggan@british-gymnastics.org  |

## Club details

|  |  |  |
| --- | --- | --- |
| **Club/Team name:** | [Insert name] | [Insert team name if different to club name] |
| **Club contact name and number:** | [Insert contact name] | [Insert contact number] | [Insert contact email] |
| **Expected/estimated number of spectators:** | [Insert estimate no. of spectators] |

## Performance details

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Music** |  | **Floor** | **Tumble** | **Trampette** |
| **Song:** | [Insert song name] | [Insert song name] | [Insert song name] |
| **Method of submission:** | Submission method |
| **Deadline of music:** | **[Insert date]** |

Please ensure you bring a copy of music on the day of the competition as a backup.

## Judges’ details

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Most relevant judging qualification** | **BG no.** | **Contact no.** | **Emergency contact no.** |
| [Insert name] | [Qualification] | [Insert BG no.] | [Insert no.] | [Insert no.] |
| [Insert name] | [Qualification] | [Insert BG no.] | [Insert no.] | [Insert no.] |

If you can nominate more than one qualified judge that would be ideal to support the competition. If you don’t have a judge, please contact the British Gymnastics Competition Coordinator to discuss support options.

## Coaches’ details

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Gender** | **BG no.** | **Contact no.** | **Emergency contact no.** |
| **Supervising coach**Must be BG Gold, Joint Gold or Life Member. |
| [Insert name] | [Gender] | [Insert BG no.] | [Insert no.] | [Insert no.] |
| **Assisting coaches** (where appropriate)Must be BG Silver (if level 1), Gold, Joint Gold or Life Member. |
| [Insert name] | [Gender] | [Insert BG no.] | [Insert no.] | [Insert no.] |
| [Insert name] | [Gender] | [Insert BG no.] | [Insert no.] | [Insert no.] |
| [Insert name] | [Gender] | [Insert BG no.] | [Insert no.] | [Insert no.] |
| **Helpers** (where appropriate)Don’t require membership but must be accompanied by a named coach (above) at all times. |
| [Insert name] | [Gender] | [Insert BG no.] | [Insert no.] | [Insert no.] |
| [Insert name] | [Gender] | [Insert BG no.] | [Insert no.] | [Insert no.] |

**Note:** BG coaching ratios still apply.

Entry payment details

**Cost per team:**

|  |  |
| --- | --- |
| **Micro TeamGym** | **Full TeamGym** |
| £30 per entry | £60 per entry |

**Cost per spectator:**

|  |  |  |
| --- | --- | --- |
| **Adult** | **Child (under 16 years)** | **Infant (under 5 years)** |
| £5.00 | £0.00 | £0.00 |

**Note:** Spectator tickets can be purchased from the club on the day of the event.

|  |
| --- |
| **BACs transfer:** |
| **Name:** | Hinckley Olympic Gymnastics Club |
| **Account number:** | 08612242 |
| **Sort code:** | 60 – 11 – 06 |
| **Reference:** | HGC TeamGym comp [Club name] |

Please ensure the correct amount is paid upon entry. Without payment, entry will not be counted.

## Gymnasts’ details

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **No.** | **Gymnast name** | **Gender** | **Disability** | **D.O.B.** | **BG no.** | **Category** |
| 1 | [Insert name] | Gender | Y / N | [Insert D.O.B.] | [BG no.] | [Category] |
| 2 | [Insert name] | Gender | Y / N | [Insert D.O.B.] | [BG no.] | [Category] |
| 3 | [Insert name] | Gender | Y / N | [Insert D.O.B.] | [BG no.] | [Category] |
| 4 | [Insert name] | Gender | Y / N | [Insert D.O.B.] | [BG no.] | [Category] |
| 5 | [Insert name] | Gender | Y / N | [Insert D.O.B.] | [BG no.] | [Category] |
| 6 | [Insert name] | Gender | Y / N | [Insert D.O.B.] | [BG no.] | [Category] |
| 7 | [Insert name] | Gender | Y / N | [Insert D.O.B.] | [BG no.] | [Category] |
| 8 | [Insert name] | Gender | Y / N | [Insert D.O.B.] | [BG no.] | [Category] |
| 9 | [Insert name] | Gender | Y / N | [Insert D.O.B.] | [BG no.] | [Category] |
| 10 | [Insert name] | Gender | Y / N | [Insert D.O.B.] | [BG no.] | [Category] |
| 11 | [Insert name] | Gender | Y / N | [Insert D.O.B.] | [BG no.] | [Category] |
| 12 | [Insert name] | Gender | Y / N | [Insert D.O.B.] | [BG no.] | [Category] |

A **maximum** of 12 (Full TeamGym) or 5 (Micro TeamGym) gymnasts may enter per team.

A **minimum** of 6 (Full TeamGym) or 3 (Micro TeamGym) gymnasts may enter per team.

## Thank you

We are looking forwards to seeing you at our event

Hinckley Gymnastics Club