



BERMUDA GYMNASTICS ASSOCIATION
INTERNATIONAL GYMNASTICS CHALLENGE
National Training Center
St. David's, Bermuda

Meet Email: igcbermuda@gmail.com

Meet Date: March 16th, 17th, 18th, 2018

Early Registration due by November 30th, 2017

Entry Form + Payment due by January 15th, 2018

Athlete level and Name Changes and Medical refunds only February 15th, 2018

USAG ATHLETES REGISTRATION FORM

Name of Club / School:	Country:
Address:	
Email:	Tel. number:
Contact(s):	

Registration fee per athlete: US\$125.00. Contact igcbermuda@gmail.com for payment info.

*All teams must provide documentation via the club director or executive board that all coaches attending have up to date vulnerable persons police clearance

No.	Athlete's Last Name	Athlete's First name	Gender	Date of Birth (dd/mm/yyyy)	USAG Level
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					



Bermuda Gymnastics Association
Registered Charity #296
P O. Box FL 293, FLATTS, FL BX - BERMUDA - (441)-295-0589
Email: bdagymnastics@northrock.bm
www.bermudagymnastics.com



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15					
16					
17					
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EMERGENCY MEDICAL TREATMENT

The Directors, Assistants or assigned chaperons of this event will act as guardians/spokespersons in the event that emergency treatment/hospitalization (including anaesthesia) is necessary for any competitor en route to or from or at the site of the above event or hospital or other medical facility. Should a health emergency arise, notification to parents or guardians will be attempted, but that if they cannot be reached by telephone, such medical treatment as deemed necessary by competent medical personnel will be authorized by the Directors of this event. Individual competitors or their assigned parent, guardian or representative will be responsible for their own medical expenses.



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