

## 2027 USA GYMNASTICS WASHINGTON BID FORM

Bid Form, Meet Request Form along with an assigning fee of \$3 per judge/per day must be mailed to USAG WA office by midnight on July 1<sup>st</sup>, 2024.

c/o Gymnastics East: 13425 SE 30<sup>th</sup> St, Bellevue, WA 98005

Meet Request forms will be out sometime in May of 2024

Name of Competition:		Year:	
Name of Host Club:			
Phone Number:	Email:		
Name of Meet Director:		Cell #:	
USAG Pro #:	_Safety Exp:	Bkgd Exp:	
Number of meets you have hosted in the last 2 years:			
LocalSectional	State	RegionalNational	
What was the number in attendance	ce at your largest me	eet?	
Number of meets you have attended in the past 2 years? StateRegional National			
Facility Name:			
A letter from the site showing available	ility of use of the facilit	y for these dates must accompany the	bid form.
Address:			
Size of Competition Area:(min. 100' X 90' required) Spectator Capacity:			
Separate Warm Up Area? Yes□No□Distance from Competitive Gym:			
Facility Rental Fee:		Air-Conditioned: Yes□ No	o□
Dressing Room for Gymnasts Yes□No□ Adequate number of restrooms? Yes□No□			
Adequate parking? Yes□No□Describe:			
Separate Meeting Room for Judges? Yes□No□			
Projected Entry Fee: Sets of Equipment: □ -1 □ -2 □ -Undecided □-Prepared for either			
Do you agree to pay State and Regional Head Tax per athlete? Yes□No□			
What type of Emergency Medical Personnel and Supplies will be available at the meet site?			
Nearest Airport (s):		Distance from site:	
Hotel Accommodations:	Di	stance from site:Cost:	
I certify that the above information is accurate. I am Meet Director certified and agree to follow the			
guidelines as listed in the USAG Women's Rules and Policies in the conduct of the meet.			
Signature of Meet Director:		Date:	
Signature of Club Owner:		Date:	