

USA GYMNASTICS WASHINGTON BID FORM

2025/2026 State Championship Meets

Must be to the USA Gymnastics WA office by June 15th, 2023 c/o ECGA: 17965 NE 65th Street, Redmond, WA 98052 or email to usagwashington@gmail.com

Name of Competition:			Year:		
Name of Ho	ost Organization:				
Address:					
Phone Num	ber:	Ema	il:		
Name of Meet Director:		Cell		#:	
USAG Pro #:		_Safety Exp:	E	Bkgd Exp:	
Number of r	meets you have host	ed in the last 2 yea	rs:		
Local	Sectional	State	Regional	Na	tional
What was th	ne number in attenda	ince at your largest	meet?		
Number of r	meets you have atter	nded in the past 2 y	ears? State	Regional	National
Facility Nam	ne:				
	the site showing availa	-	-		
Size of Corr	npetition Area:		_ Spectator Cap	acity:	
Separate W	'arm Up Area? Yes□	No Distance from	n Competitive G	ym:	
Facility Rent	tal Fee:		Air-0	Conditioned: `	Yes□ No□
Dressing Ro	oom for Gymnasts Ye	s No Numbe	er of restrooms:	Women	Men
Length of Va	aulting Area (includir	ng runway, table, ma	at area)		
Adequate pa	arking? Yes \Box No \Box D	escribe:			
Separate M	eeting Room for Jude	ges? Yes□ No□			
Format to b	e used: Traditional□	Non Traditional	Number &	Type of Equi	oment to be used:
Vault:	Bars:	Beam:	Floor:	Bo	oards:
Bars Spread	d	Type of Rails			
Type of Awards:			Estimated Cost:		
Spectator A	dmission Prices: Adu	ults:	C	hildren:	
What type c	of Emergency Medica	al Personnel and Su	ipplies will be a	vailable at the	e meet site?
Nearest Airport (s):			Distance from site:		
Hotel Accor	nmodations:		Distance from s	ite:C	ost:
I certify that	the above information	on is accurate. I am	Meet Director of	ertified and a	agree to follow the
guidelines a	as listed in the USAG	Women's Rules ar	nd Policies in the	e conduct of	the meet.
Signature of	f Meet Director:			Date	:

Signature of Club Owner:_____Date: _____