

2020 LOCAL CONTEST SOLO ENTRY

(MAY NOT BE USED FOR STATE CHAMPIONSHIPS)

Name: _____ Birthdate: _____ Age as of 8/31/20: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Parent/Guardian: _____ Email: _____
 Coaches (list all in past year): _____ Twirling Organization: _____

PLEASE CIRCLE OR HIGHLIGHT THE EVENTS YOU ARE ENTERING. DO NOT STAPLE CHECK TO ENTRY

FOUNDATION EVENTS

Nov Basic	Nov Military	Nov Pres	Nov Parade March
Beg Basic	Beg Military	Beg Pres	Beg Parade March
Int Basic	Int Military	Int Pres	Int Parade March
Adv Basic	Adv Military	Adv Pres	Adv Parade March

_____ Events @ \$7 = \$ _____

CAS EVALUATION \$10.00 (Levels C-BII) \$15.00 (Levels A-Elite & Short Program)
 Athletes may only attempt 2 levels of Compulsories and/or Movement per event.

Compulsories:	\$10.00 each	C B BI BII						
Compulsories:	\$15.00 each	A AA AAA Elite	Short Program	\$15.00 _____	JR	SR		
Movement Technique:	\$10.00 each	C B BI BII						(Elite ONLY)
Movement Technique:	\$15.00 each	A AA AAA Elite						

_____ Events @ \$10 = \$ _____ # _____ Events @ \$15 = \$ _____

Athletes MUST present their record book

CRITIQUES \$20.00 EACH

Freestyle:	JUV	JR	SR	Level:	A	AA	AAA	Elite	No Level
Pairs:		JR	SR	Pairs Partner:	_____				
				Collegiate Twirl	_____				

_____ Critiques @ \$20 = \$ _____ (# of critiques accepted may be limited)

**Please provide coaches email address for Critiques: _____

SOLO EVENTS \$15.00 EACH (Rating Lane \$12.00 each)

Nov USTA Strut	Nov Artistic Twirl	Nov 2 Baton	Nov 3 Baton	Nov Solo
Beg USTA Strut	Beg Artistic Twirl	Beg 2 Baton	Beg 3 Baton	Beg Solo
Int USTA Strut	Int Artistic Twirl	Int 2 Baton	Int 3 Baton	Int Solo
Adv USTA Strut	Adv Artistic Twirl	Adv 2 Baton	Adv 3 Baton	Semi Solo*
				Adv Solo

Rating USTA Strut* (\$12)	Rating Artistic Twirl* (\$12)	Rating 2 Baton* (\$12)	Rating 3 Baton* (\$12)	Rating Solo* (\$12)
---------------------------	-------------------------------	------------------------	------------------------	---------------------

_____ Events @ \$15 = \$ _____ # _____ Events @ \$12 = \$ _____

*Non-sanctioned event

PAIRS EVENTS \$30.00 PER PAIR

Artistic Twirl Pairs:	NOV	BEG	INT	ADV	Duet:	NOV	BEG	INT	ADV
AT Pairs Partner:	_____				Duet Partner:	_____			
USTA #:	_____	Birthdate:	_____		USTA #:	_____	Birthdate:	_____	

_____ Events @ \$30 = \$ _____

INCLUDE SIGNED WAIVER WITH ENTRY: I accept full responsibility for any accident that may occur and I will not hold the USTA, NY Council or the post organization or facility and all their officers/directors or employees liable.

Parent/Guardian Signature: _____ Date: _____

Entry Total: \$ _____
 Program (Optional) \$ 3.00
 USTA Surcharge (Required) \$ 0.50
 Non-Member Fee (If not a Current Member) \$ 5.00

USTA # _____

TOTAL ENCLOSED:

\$ _____