

OPEN TREBOADA CIDADE DO LÉREZ

DEFINITIVE ENTRY

Club / Federation: _____

Contact Person: _____

Phone: _____ Email: _____

- Each inscription includes the performance of 2 routines in one day and 1 coach or staff.
- If you want to perform 2 more routines (the same or another ones) you can make a second inscription.
- Gymnasts outside Galicia will have priority for FRIDAY and SATURDAY QUALIFICATIONS
- If the date you select is not available, the organization will contact you.
- Send this DEFINITIVA ENTRY + certification of ENTRY FEE PAYMENT to: opentreboada@gmail.com until **1st of MARCH**

	COMPLETE NAME	DATE OF BIRTH	CATEGORY	DAY FOR QUALIFICATIONS	COMPLETE NAME OF COACH OR STAFF
TOP					
BASE					
BASE					
BASE					

SUB-16 or ABSOLUTO

THURSDAY 23rd, FRIDAY 24th or SATURDAY 25th

Which day do you want to compete?

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	COMPLETE NAME	DATE OF BIRTH	CATEGORY	DAY FOR QUALIFICATIONS	COMPLETE NAME OF COACH OR STAFF
TOP					
BASE					
BASE					
BASE					
TOP					
BASE					
BASE					
BASE					
TOP					
BASE					
BASE					
BASE					
TOP					
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BASE					
BASE					