



# CHAMPION GYMNASTICS 2020 CHAMPION CHALLENGE

## Developmental Entry Form - Non Sanctioned

Gym \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Coach Name \_\_\_\_\_  
 Coach Name \_\_\_\_\_  
 Coach Name \_\_\_\_\_

Gymnast Name	Level	Birthdate

**Please send entries to:**  
 Champion Gymnastics  
 2531 Blankenbaker Parkway  
 Louisville, Ky 40299

**Make checks payable to:**  
 Champion Gymnastics  
 Total # of Levels Pre-Team, Level 1 , Boys Level 3

\*Per the KY Revenue Department all Entry Fees are subject to a 6% Sales Tax = \_\_\_\_\_  
 TOTAL = \_\_\_\_\_