



Excalibur Gala Registration Form May 27th, 2017

_____ / _____ / _____
Gymnast Name

Age

Date of Birth

PLEASE DO NOT FORGET THIS PART:

T- SHIRT SIZE (circle one): CXS CS CM CL CXL AS **GALA LEO** (circle one): Yes No

Please sign below and return to the front office.

- Yes, I choose to allow my daughter / son to participate in the 2017 Excalibur GALA on May 27th
- I am aware that there are no refunds for GALA registration and extra (advanced purchased) tickets.

Parents Signature

Date

Form Must Be Returned To Front Office By: May 20, 2017

Office Use Only

Class: _____

Coach: _____

Day(s): _____

Time: _____ - _____

Free Tickets: _____

Extra Advanced Purchased Tickets: _____

Session: _____ Session Time: _____

Payment Total & Method: _____