



Team Roster & Crossover Form

*Please submit one roster per team along with your Registration Form

Gym/School: _____

Team Name: _____ Coach: _____

Division: _____ Level: _____

Competition Name: _____ Competition Date: _____

Email: _____ Phone: _____

*There are no crossover fee discounts. Participants must pay full price registration fee.

Participant's Name	Crossovers Mark an X	Gender M/F	Age as of 08/31/11	Crossing over to: Team's name & level of 2 nd team
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