



BERMUDA GYMNASTICS ASSOCIATION  
INTERNATIONAL GYMNASTICS CHALLENGE  
National Training Center  
St. David's, Bermuda

Meet Email: [igcbermuda@gmail.com](mailto:igcbermuda@gmail.com)

Meet Date: March 16th, 17th, 18th, 2018

Early Registration due by November 30th, 2017

Entry Form + Payment due by January 15th, 2018

Athlete Name and Level Changes and Medical refunds only until February 15th, 2018

**USAIGC ATHLETE REGISTRATION PAGE**

Name of Club / School:	Country:
Address:	
Email:	Tel. number:
Contact(s):	

Registration fee per athlete: US\$125.00. Registration per coach: US\$25. Payment form is attached, contact [igcbermuda@gmail.com](mailto:igcbermuda@gmail.com) for more info.

No.	Athlete's Last Name	Athlete's First name	Gender	Date of Birth (dd/mm/yyyy)	USAIGC Member Number	USAIGC Level
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2						
3						
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Bermuda Gymnastics Association  
Registered Charity #296  
P O. Box FL 293, FLATTS, FL BX - BERMUDA - (441)-295-0589  
Email: [bdagymnastics@northrock.bm](mailto:bdagymnastics@northrock.bm)  
[www.bermudagymnastics.com](http://www.bermudagymnastics.com)



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**EMERGENCY MEDICAL TREATMENT**

The Directors, Assistants or assigned chaperons of this event will act as guardians/spokespersons in the event that emergency treatment/hospitalization (including anaesthesia) is necessary for any competitor en route to or from or at the site of the above event or hospital or other medical facility. Should a health emergency arise, notification to parents or guardians will be attempted, but that if they cannot be reached by telephone, such medical treatment as deemed necessary by competent medical personnel, will be authorized by the Directors of this event. Individual competitors or their assigned parent, guardian or representative will be responsible for their own medical expenses.



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