



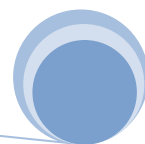
REGISTRATION FORM

(PRELIMINARY DEADLINE 16.10.2016.

DEFINITIVE DEADLINE 13.11.2016.)

COUNTRY/FEDERATION:	
CLUB:	
CONTACT NAME:	
PHONE/ FAX:	
E-MAIL:	
ARRIVAL DATE:	
DEPARTURE DATE:	
NUMBER OF PERSONS (DELEGATION):	
NUMBER OF EXTRA PERSON/S:	
TOTAL NUMBER OF PERSONS FOR THE ACCOMMODATION:	

JUDGE:	
COACH:	





LEVEL A - INDIVIDUAL COMPETITION

NAME OF THE GYMNAST	CATEGORY	DATE OF BIRTH	APPARATUS
1. 2.	BABY (2008 and younger)		WA + app by choice WA + app by choice
1. 2.	MINI (2007 and younger)		WA, ROPE AND HOOP
1. 2.	HOPES (2006 and younger)		ROPE, HOOP AND BALL
1. 2.	PRE-JUNIORS (2004 and younger)		ROPE, HOOP, BALL AND CLUBS
1. 2.	JUNIORS (2001 and younger)		ROPE OR RIBON, HOOP, BALL AND CLUBS
1. 2.	SENIORS (2001 and older)		HOOP, BALL, CLUBS AND RIBON





LEVEL B - INDIVIDUAL COMPETITION

NAME OF THE GYMNAST	CATEGORY	DATE OF BIRTH	APPARATUS
1.	BABY 1 (2009 and younger)		WA
2.			WA
1.	BABY 2 (2008 and younger)		WA
2.			WA
1.	MINI (2007 and younger)		1 app by choice
2.			
1.	HOPES (2006 and younger)		2 app by choice
2.			
1.	PRE-JUNIORS (2005 and younger)		2 app by choice
2.			
1.	JUNIORS (2001 and younger)		2 app by choice
2.			

Please send back the completed form to christmascup@krgz.hr or Fax: + 385 1 655 5868

