THSGCA COMMITMENT FORM

THE GYMNASTS LISTED BELOW, REPRE	SENTINGSCHOOL, DO
AGREE TO COMPETE FOR THE ABOVE NA	AMED SCHOOL IN ALL SESSIONS FOR WHICH THEY QUALIFY
	ON UNDER REGIONAL AND STATE CHAMPIONSHIPS. (Page 21
	npete in the High School REGIONAL meet unless he/she will
	also"). The only exception to this commitment is for participation in a
school sponsored COMPETITION.)). The only exception to this communicate is for participation in a
school spoilsored COMI ETTTON.)	
(PRINT NAME)	(SIGNATURE)
	<u> </u>
	
	
	
	
PRINT COACHES NAME	SIGNATURE OF COACH
Date	SIGNATURE OF CONCIL
2	
PRINT PRINCIPAL'S NAME	SIGNATURE OF PRINCIPAL

SEND THE ORIGINAL TO THE THSGCA SECRETARY AND A COPY TO YOUR REGIONAL CHAIRPERSON PRIOR TO YOUR DISTRICT CHAMPIONSHIPS

Date