



PETITION FORM

This form is to be completed by the coach and gymnast. Refer to the Men's Rules & Polices, or applicable selection procedures document for petition guidelines.

Send completed form and support documentation to:

Senior Events: Vice President of Men's Program
USA Gymnastics
1099 N. Meridian St., Suite 800
Indianapolis, IN 46204

Junior Region & National Events: Respective Regional Chairperson

Junior Local & State Events: Respective State Chairperson

Name of Event Being Petitioned To: _____

| | Elite | Level 10 | Level 9 | Level 8 | Level 7 | Level 6 | Level 5 | Level 4 |
|-----------------------|-------|----------|---------|---------|---------|---------|---------|---------|
| Check Level | | | | | | | | |
| Enter Age | | | | | | | | |
| Enter JN or JE | | | | | | | | |

Date of Birth: _____ Club/Program: _____

Gymnast's Name: _____ Athlete #: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Home Phone: _____

Coach's Name _____ Pro #: _____

Club Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Work Phone: _____ Cell Phone: _____ Home Phone: _____

Reason for Petition:

Gymnast's Signature: _____ Date: _____

Coach's Signature: _____ Date: _____

Note: Petition Form must be fully completed and include coach's statement, physician's statement, score sheets, etc., or petition will not be considered.