



Injury Petition Form

Deadline 3 days following the last qualifying meet

Please check: All Around Gymnast _____ Individual Event Specialist _____

Minimum Scores: AA Gymnast 35.00, IES gymnast 9.35 for event

**** If this form is not completed correctly, it may not be accepted. It is the responsibility of the coach to provide all necessary information**

Meet Petitioning To: _____

Gymnast's Name: _____ USAG # _____

Birthdate: _____ Age and Level _____

Coach's Name: _____ Phone Number: _____

Gym Name: _____ **Coach's Cell Phone #** _____

Address: _____

Fax Number: _____ E-Mail Address _____

With this form you must include:

1. Photocopy Results of a minimum of 1 Sanctioned Meet.

Meet: _____ Date _____

Scores: Vault: _____ Bars: _____ Beam: _____ Floor: _____

All Around Score: _____

2. Physician's written verification of illness or injury and release to return to gymnastics activity. Please specify the DATE of return.