



**BLACK DIAMOND**  
GYMNASTICS & SPORTS CENTER

Club Name: \_\_\_\_\_ Club's USAG #: \_\_\_\_\_

Club Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Coach First Name	Coach Last Name	USAG Pro #	Safety Expiration	Background Expiration	U100? (Y/N)

Entry Fee: \$125 per athlete

# XCEL Gymnasts = \_\_\_\_\_ x \$125 = \$ \_\_\_\_\_

**Total Due = \$ \_\_\_\_\_**

**Checks made payable to: Black Diamond Gymnastics and Sports Center**

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**Payments by Credit Card (3.5% processing fee will be added.)**

Circle one:      Visa              Master Card              American Express

Card #: \_\_\_\_\_ Expiration: \_\_\_\_\_

Name on card: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

**Email Address:** blackdiamondcompetitions@gmail.com

**Mailing Address:** Black Diamond Gymnastics PO Box 982436 Park City, UT 84098