



# 2020/2021 USA GYMNASTICS REQUEST FOR FOREIGN SANCTION

\$140

**Application must be postmarked no later than 30 days before competition.**

**A separate sanction request is REQUIRED for each event location and discipline.** \$25 Rush fee will be assessed to requests submitted less than 30 days prior to the event. Approval of this foreign sanction request allows a club to host a club-level invitational meet. Country versus country competition is NOT allowed. In addition, all participants in the event may representing their club ONLY and not their country. Completed applications being paid by credit card can be returned to USA Gymnastics by fax to 317.732.1791.

## EVENT DETAILS *All fields are REQUIRED.*

Date(s) of Meet \_\_\_\_\_ Name of Meet \_\_\_\_\_  
Site Address (if different than club) \_\_\_\_\_

**Type of Event:** **Competitive:**  Exhibition  Local Meet  Invitational Meet  State Meet  Regional Meet  National Meet  Virtual  
**Educational:**  Workshop  Camp  Clinic  Judging Exam **Will athletes be present?**  Yes  No

Select only ONE discipline type per sanction request. Example: Men's and Women's events held during the same meet in the same facility require TWO separate sanctions.

**Discipline:**  Women  Men  Acrobatic  Gymnastics for All  Rhythmic  Trampoline & Tumbling

**Level(s) of competition** \_\_\_\_\_  JO Rules  FIG Rules (additional fees/rules apply please see guidelines on page 2 for more information.)

**Participating Countries\*** (attach extra sheets if necessary) \*All participants must have valid membership numbers. Foreign membership fee is \$50.

a. \_\_\_\_\_ b. \_\_\_\_\_ c. \_\_\_\_\_  
d. \_\_\_\_\_ e. \_\_\_\_\_ f. \_\_\_\_\_

### Please check all that apply

Event involves athlete(s) from another country  Event is for training purposes only  Event involves USA National Team member(s)  
 Event is competition  Event involves Foreign National Team member(s)  Event is an exhibition  
 Admission is being charged. Amount \$ \_\_\_\_\_  There will be a television broadcast. Network: \_\_\_\_\_  
 Sponsor(s) have been solicited. Name sponsor(s): \_\_\_\_\_

## EVENT DIRECTOR & CLUB DETAILS *All fields and Event Director signature are REQUIRED.*

Event Director Name \_\_\_\_\_ Professional Membership No. \_\_\_\_\_  
Club Name \_\_\_\_\_ Club No. \_\_\_\_\_  
Club Address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

By my signature below, I represent, warrant and agree that: (1) I am a professional member in good standing with USA Gymnastics ("USAG"); (2) I fully understand the USAG Rules and Policies; (3) the event will be conducted in accordance with applicable USAG Rules and Policies; (4) the event will be conducted in accordance with all applicable USAG policies, including its Safe Sport policy, and all federal, state, and local laws, ordinances, regulations, orders and mandates, including those related to COVID-19; (5) I fully assume responsibility and liability for this event; (6) it will verify that all athletes, coaches, and judges are registered USAG members in good standing; (7) no persons permanently ineligible for, or suspended from, membership in USA Gymnastics will be associated with this event in any way (lists of such persons are on USAG's website); (8) I understand there may be fines and penalties for any violations of USAG Rules and Policies; and (9) I understand that any violation of certifications and/or any failure to adhere to the approved dates and/or times may include the loss of sanctioning privileges.

Signature of Event Director \_\_\_\_\_ Date \_\_\_\_\_

## ONLINE RESERVATION INFORMATION

Provide the details below in order to ensure proper activation of the online reservation system for the sanctioned event.

If known: Meet Referee Name: \_\_\_\_\_ Meet Referee Member No.: \_\_\_\_\_

Provide a start date to begin athlete/coach meet reservations: \_\_\_\_\_ Provide the last date to which athlete/coach meet reservation may be cancelled: \_\_\_\_\_

Provide a close/end date for athlete/coach meet reservations: \_\_\_\_\_ Provide the last date to which an athlete level change may be made to a reservation: \_\_\_\_\_

## PAYMENT INFORMATION

Check/Money Order  Credit Card \_\_\_\_\_ Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_  
Print Cardholder Name \_\_\_\_\_ Signature \_\_\_\_\_  
Cardholder Phone \_\_\_\_\_ Email (for receipt) \_\_\_\_\_

**PAYMENT TOTALS** - Make Check/Money Order payable to USA Gymnastics

**Foreign Sanction Request: \$140 • Rush Fee: \$25 (less than 30 days)..... Total Due: \$ \_\_\_\_\_**

Please return forms: 1099 N. Meridian St., Ste. 800 • Indianapolis, IN 46204 or fax 317.732.1791

**Office Use Only**  
Number \_\_\_\_\_  
Rec'd Date \_\_\_\_\_  
Payment Amt \_\_\_\_\_  
Check No. \_\_\_\_\_  
Email sent date \_\_\_\_\_  
Approval \_\_\_\_\_  
By \_\_\_\_\_ Other \_\_\_\_\_

Questions? Contact Member Services at 800.345.4719 or membership@usagym.org