USA GYMNASTICS®

VIRTUAL PLATFORM REQUEST

Please complete this form in its entirety to have the suggested virtual platform reviewed:

Platform Name: _____ Cost to use platform: _____

Does the platform support: ◯ Live streaming ◯ Video upload ◯ Both

Is access password protected and/or invite only? ◯ Yes ◯ No

Note: Any platform allowing general public viewing will NOT be considered

How does each participant access competition video(s) and/or results?

Athletes: _____

Coaches: _____

Judges: _____

Parents / Families: _____

Spectators: _____

When competition is over, are the recorded videos / streams stored and available for viewing later? If so, for how long?

_____

What disciplines are supported? (Mark all that apply)

☐ WAG ☐ MAG ☐ TT ☐ RG ☐ ACRO ☐ GFA

Are you willing to demo the platform with USAG? ◯ Yes ◯ No

Please provide any additional information about this platform that might help in the decision making process:

_____

_____

_____

Request submitted by: _____ USAG #: _____

OFFICE USE ONLY

Date received: _____ By: _____

Approved: Yes ◯ No ◯ Other: _____