



**2025 National Judges Cup
Patty J. Shipman Level 7 State Team Challenge
January 4, 2025
Entry Form**

State: _____ State Judging Director Name: _____

Contact Phone: _____ Contact E-Mail: _____

Gymnast Name	USAG #	Club Name	Club #	1st Half/2nd Half
1.				

Coach: _____ Phone: _____ USAG #: _____

Coach: _____ Phone: _____ USAG #: _____

Gymnast Name	USAG #	Club Name	Club #	1st Half/2nd Half
2.				

Coach: _____ Phone: _____ USAG #: _____

Coach: _____ Phone: _____ USAG #: _____

Gymnast Name	USAG #	Club Name	Club #	1st Half/2nd Half
3.				

Coach: _____ Phone: _____ USAG #: _____

Coach: _____ Phone: _____ USAG #: _____

Gymnast Name	USAG #	Club Name	Club #	1st Half/2nd Half
4.				

Coach: _____ Phone: _____ USAG #: _____

Coach: _____ Phone: _____ USAG #: _____

Gymnast Name	USAG #	Club Name	Club #	1st Half/2nd Half
5.				

Coach: _____ Phone: _____ USAG #: _____

Coach: _____ Phone: _____ USAG #: _____

Gymnast Name	USAG #	Club Name	Club #	1st Half/2nd Half
6.				

Coach: _____ Phone: _____ USAG #: _____

Coach: _____ Phone: _____ USAG #: _____

Gymnast Name	USAG #	Club Name	Club #	1st Half/2nd Half
7. <i>alternate</i>	<i>alternate</i>	<i>alternate</i>	<i>alternate</i>	<i>alternate</i>

Coach: _____ Phone: _____ USAG #: _____

Coach: _____ Phone: _____ USAG #: _____

Entry Fees are \$150⁰⁰ per gymnast. State Team Fees are \$75⁰⁰ per state. Entry Fees are non-refundable.

Please make all checks payable to USA Competitions and mail to:

NAWGJ _____ Gymnasts x \$ \$150⁰⁰ = _____
 Attn: Evelyn Paradis _____ Team Entry Fee x \$75⁰⁰ = _____
 32920 Alvarado Niles Rd, Ste 210 _____ Total Due = _____
 Union City, CA 94587

Please contact Evelyn Paradis with any questions.

evelynparadis1@gmail.com 925-963-4627