



Gymnastics
New South Wales

'FRIENDLY'

EVENT SANCTION APPLICATION FORM

All details need to be filled in for an application to be processed.



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EVENT DETAILS:

Event Name: _____

Event Date: _____

Contact Person: _____
(The name of the person responsible for running the competition)

Sanction Officer: _____
(List of Sanction Officers found in the sanction events section of the GymNSW website)

Host Club/Region: _____

Club 10 Star Rating: _____
(Note: Clubs must hold a Star 2 rating to host state qualifiers)

Discipline: _____
(MG/WG/RG/ACRO/AERO/TRP)

Levels: 1 2 3 4 5 6 7 8 9 10
(circle all levels which are available to compete)

Other Levels: _____

Other Levels: _____

Other Levels: _____

Other Levels: _____

Other Levels: _____

Judging Coordinator: _____

First Aid Officer: _____
(Designated officer at the event – this may include a coach)

Competitor Entry Fee: \$ _____

VENUE DETAILS

Competition Address: _____

Suburb: _____

Postal Entries TO Attn: _____

Address: _____

Suburb: _____

Club/Region Phone: _____ Fax: _____

Email Address: _____

Would you like the event promoted via the Gymnastics NSW Website YES / NO

(If YES contact information for entries and entry form must be submitted electronically to events@gymnsw.org.au)

NOTE: A competition will not be sanctioned if participants from a non affiliate member participate in the event

SANCTION OFFICER CHECK:		
NME	DATE:	SIGNATURE: