

APPENDIX H-3

GYMNASTICS NOVA SCOTIA

COMPETITION SANCTION

FORM

Sanction forms with payment must be received by the GNS office no later than October 1st of that competitive season.

1. Club in charge or organization: _____

2. Name of Competition: _____

3. Location of Competition: _____
Street
Town

4. Name Competition Contact: _____

Email: _____ Phone: _____

5. Date of Competition: 1st Choice: _____ 2nd Choice: _____

6. Time of the Competition: Start: _____ Finish: _____

Note: Competition including awards ceremony must end no later than 9:30pm

7. Estimated Number of Participants: _____

8. List Categories to Compete:

ARTISTIC FEMALE	ARTISTIC MALE	TUMBLING	TRAMPOLINE

Expected Number of Athletes: Female: _____ Male: _____

-
- Signature of Club Representative

- Executive Director
Gymnastics Nova Scotia
5516 Spring Garden Rd., 4th floor
Halifax, N.S. B3J 1G6
(902) 425-5450, ext. 338 FOR

Application Received: _____

Payment Received: _____

Receiver's Signature: _____

Date Received by Program Director: _____

Signature of Program Director: _____

*****Technical Chairs agree to send the draft schedule to Judging Chairs before being sent to clubs/coaches.***

WPC } [- accept/reject this sanction (pending sufficient judges)]

MPC } [- accept/reject this sanction (pending sufficient judges)]

TTTC } [- accept/reject this sanction (pending sufficient judges)]

Date: _____ Program Director: _____