

# USA Gymnastics Region 3

## Travel Grant Application

Please type or print clearly

Name: \_\_\_\_\_

Team Affiliation: \_\_\_\_\_ Email address: \_\_\_\_\_

Length of time with current team: \_\_\_\_\_

Competition date: \_\_\_\_\_ Competition Name: \_\_\_\_\_

I attended the above mention competition/camp as a:

\*Level 9/10 \_\_\_\_\_ (See Details) Jr. Elite \_\_\_\_\_ Sr. Elite \_\_\_\_\_ Coach \_\_\_\_\_ Judge \_\_\_\_\_

\_\_\_\_\_ I attended this competition/clinic on my own and representing my own team

\_\_\_\_\_ I attended this competition/clinic in order to earn points for the Jr/Sr national team

\_\_\_\_\_ USA Gymnastics assigned me to this competition/clinic

\_\_\_\_\_ I was fully funded by USA Gymnastics to this competition/clinic

\_\_\_\_\_ I was partially funded by USA Gymnastics to this competition/clinic

\_\_\_\_\_ I received no funding from USA Gymnastics for this competition/clinic

\_\_\_\_\_ I attended the national camp for Jumpstart

\_\_\_\_\_ I was a member of the Region 3 All Star team who participated at nationals

\_\_\_\_\_ I was a finalist at an international event as stated above.

\_\_\_\_\_ I was a regional All Star

Application will NOT be considered if the following is not included:

- Travel documentation (Travel itinerary or purchase documentation)
- Results from past two regional championships showing eligibility (located on the region 3 website)
- Results from competition listed above
- Results from previous national event showing eligibility (located on the USAG website)

**The reimbursement funds will be made out to the Region 3 member and mailed to the party who initially funded the travel.**

**Please remit funds to:**

Name \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I \_\_\_\_\_ as the head coach of the affiliated member club listed above do hereby  
(head coaches)  
certify that the athlete requesting funds is not currently in any default of payment or dues to the USAG Region 3  
member club listed as the affiliated club on this request.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Gym Email address: \_\_\_\_\_ Athlete Email address \_\_\_\_\_

The Region 3 board of directors will decide at the annual Region 3 Championships on all scholarships, grants and prize money. Academic Scholarships will be announced at that time.

\*A level 10 athlete must have competed level 10 at the previous JO National Championships, Region 3 Championships, Elite Challenge or Winter Classic.

\*They must have placed in the top 8 at Nationals or the top 6 at Winter Classic, Top 10 at Elite Challenge

\*All Results must accompany the funding request

\*Petitions to the board will be accepted and reviewed for any athlete that does not meet the above mention criteria.

\* As of July 19, 2007, athletes will not be eligible for Funding if they are in default of any payment or dues to any USAG Region 3 member club or to any state organization within Region 3 or to the region itself.

\*Each member club or state is responsible for filing a letter of default concerning payments to the Regional office as quickly as possible in order to show that a member is currently not in good standing.

**ALL application must be mailed. No faxed copies will be accepted.**

**Mail all documentation to:**

**USAG Region 3  
Attn: Patti Conner  
7401 Topeka Ave.  
Lubbock, Tx 79424**