



New York USA Gymnastics
Outside Venue Meet Bid Form
2024 State Championship Season

Meets Interested in Hosting: (Please select from the following)

____ Level 6/7/8/9/10 March 22-24, 2024
____ Xcel B/S/G/D/P/F April 26-28, 2024
____ Level 2/3/4/5 UPSTATE May12-14, 2024 Level 2/3/4/5 DOWNSTATE ____

Contact Person: _____ Email: _____

Gymnastics Club: _____ Phone: _____

Meet Director: _____ Meet Director Certified? (Y / N)

Pro Number: _____ Exp: _____ Bkgd Exp: _____

Safety Exp: _____ Email: _____

Phone: _____

OUTSIDE VENUE

Name _____

Address _____

Approx Rental Fee _____

Handicap Accessible: (Y / N)

Scoring team with Pro Score experience: (Y / N)

Separate Awards Area: (MUST HAVE SEPARATE AWARDS AREA) Availability to run Friday sessions?: (Y / N)

Separate meeting area for officials: (Y / N)

Television and DVD for officials prep: (Y / N)

Number of available parking spots: _____

Number of restroom stalls: _____

Spectator capacity: _____

I certify that the above information is accurate. I agree to follow the guidelines as listed in the USA Gymnastics Women's Rules & Policies in conducting this event. I have read the host club responsibility attachment and agree to all terms. I will email this form to lgoldny2@gmail.com

Meet Director Signature: _____

Date: _____