

Acro for Autism: USTA Trampoline & Tumbling

TEAM NAME:	USTA CLUB NUMBER:	
ADDRESS:		
CITY:	STATE:	ZIP:
E-MAIL:		
PHONE:	FAX:	

Coaches	USTA Number	Coach T-Shirt Size

Athlete's Name	Birthdate	DMT	TR	TU	Gender	USTA Number

Total Athletes in this Discipline: x = \$

Total for Page: \$

Make all checks payable to: DGA Tampa
Entry Deadline Date: December 1, 2022



Credit Card Payment Information: (Visa or MasterCard Only)

Card Number:	
Name as it appears on credit card:	
Billing Zip Code:	Expiration Date:
Signature:	