#### **HOLLY JOLLY CUP 2023**

### Missouri-Ozark AAU Gymnastics Meet

#### December 16-17, 2023

Hosted by: Northside Gymnastic Academy

Meet Location: Northside Gymnastic Academy

1317 Tom Ginnever Ave. O'Fallon, MO 63366

Meet Director: Janet Besselman

Levels: All Xcel Divisions, Boys 4x4, Level 1-8

Gymnast Entry Fee: \$65

Team Entry Fee: \$40 per team/per level

\*\*clubs must hold an AAU Club Membership to be eligible

for team awards at competitions. \*\*

Make checks payable to: NORTHSIDE GYMNASTIC ACADEMY

Mail checks to: 1317 TOM GINNEVER AVE. O'FALLON, MO 63366

Email Entry to: janet@northsidegym.com

Entry Deadline: October 17, 2023

Late Fee: \$15 per gymnast if accepted.

Admission: \$6 adult (13 & up) \$3 Child (5 – 12) CASH ONLY

PLEASE MAKE SURE YOUR PARENTS ARE AWARE OF ADMISSION FEE AND THAT IT IS CASH ONLY.

Awards: Events: tops 3 places medals, then ribbons out 100%

AA: trophies 100% out

Event placements will be announced when receiving

the all-around placement.

Team – Banners to all teams paid by deadline.

Age groups: max of 12 gymnasts per age group

Judges: Judges are USAG rated or have passed our Ozark AAU Judge

requirements as satisfactory.

Refunds: Due to injury with valid doctor note through 12/2/23

Please Note: This event is licensed by the Amateur Athletic Union of the U.S., Inc. All participants must have a current AAU membership. AAU membership may not be included as part of the entry fee to the event. AAU membership must be obtained before the competition begins except where the event operator has a laptop available with an internet connection. BE PREPARED: Adult and Non-Athlete memberships are no longer instant and cannot be applied for at the event. Please allow up to 10 days for membership to be processed. Participants are encouraged to visit the AAU website <a href="https://www.aausports.org">www.aausports.org</a> to obtain their membership.

# HOLLY JOLLY CUP 2023 Missouri-Ozark AAU Gymnastics Meet December 16-17, 2023

Club Name					Club AAU #		
Club Contact				Phone #			
Meet Contact				Phone #			
Attending Co	oaches						
Name				AAU#			
Name					AAU#		
Name					AAU#		
Name					AAU#		
Name					AAU#		
level	# OF	\$ PER GYMNAST	TOTAL	-	TEAM \$40	TOTAL DUE PER	
	GYMNASTS					LEVEL	
1		X \$65					
2		X \$65					
3		X \$65					
4		X \$65					
5		X \$65					
6		X \$65					
7		X \$65					
8		X \$65					
ХВ		X \$65					
XS		X \$65					
XG		X \$65					
XP		X \$65					

X \$65

X \$65

BOYS 4X4

TOTAL \$ DUE	\$

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GYMNAST'S FIRST NAME	GYMNAST'S LAST NAME	BIRTHDATE	AAU#	LEVEL