



Injury Petition Form
Deadline 3 days following the last qualifying meet

** If this form is not completed correctly, it may not be accepted. It is the responsibility of the coach to provide all necessary information

Meet Petitioning To: _____

Gymnast's Name: _____ USAG # _____

Birthdate: _____ Age and Level _____

Coach's Name: _____ Phone Number: _____

Gym Name: _____ Coach's Cell Phone # _____

Address: _____

Fax Number: _____ E-Mail Address _____

1. Photocopy Results of a minimum of 1 Sanctioned Meet:

Meet: _____ Date _____

Scores: Vault: _____ Bars: _____ Beam: _____ Floor: _____

All Around Score: _____

2. Physician's written verification of illness or injury and release to return to gymnastics activity. Please specify the DATE of return.