

## Expression of Interest Form

### Event

**European Championships, Acrobatic Gymnastics, Holon 2019**

**Closing Date for receipt of Expression of Interest Form**

**28<sup>th</sup> June 2019**

<b>Club</b>			
<b>Secretary</b>			
<b>Email</b>		<b>Tel</b>	

As per Selection Policy, the Club would like to submit the following gymnast(s)/non gymnasts (include as appropriate) for inclusion in the selection process.

NAME(S)	CATEGORY / POSITION ON TEAM	GI MEM NO.	DOB	FIG LICENCE HELD	PASSPORT NUMBER	Code of Ethics Cert No. (adult only)	Garda Vetted or AccessNI Yes/No? (adult only)

**SIGNED** \_\_\_\_\_ **CLUB ROLE** \_\_\_\_\_

**N.B**

- Please attach all Gymnast(S), Coach(S)/other positions profiles - Add sheets as needed
- Adults cannot be selected to travel in any capacity unless all criteria outlined in selection policy are met
- The financial agreement form must be returned with this form for each person listed above

<b>Gymnast Profiles</b>		<b>Best Scores</b> (Most recent)	<b>NAME OF EVENT(S)</b>					
<b>PARTNERSHIP NAMES</b>		<b>Category</b>						
<b>Profile</b>								
<b>Gymnast Profiles</b>		<b>Best Scores</b> (Most recent)	<b>NAME OF EVENT(S)</b>					
<b>PARTNERSHIP NAMES</b>		<b>Category</b>						
<b>Profile</b>								
<b>Gymnast Profiles</b>		<b>Best Scores</b> (Most recent)	<b>NAME OF EVENT(S)</b>					
<b>PARTNERSHIP NAMES</b>		<b>Category</b>						
<b>Profile</b>								

<b>Adult/Coach Profile</b>		<b>Position</b>
<b>NAME</b>		
<b>Profile</b>		
<b>Adult/Coach Profile</b>		<b>Position</b>
<b>NAME</b>		
<b>Profile</b>		
<b>Adult/Coach Profile</b>		<b>Position</b>
<b>NAME</b>		
<b>Profile</b>		