



NATIONAL ELITE QUALIFIER REGISTRATION



CLUB NUMBER		CLUB NAME	
COACH NUMBER		COACH NAME	
COACH NUMBER		COACH NAME	

USAG NUMBER	FIRST NAME	LAST NAME	DATE OF BIRTH	ELITE SR/JR HOPES 11-12/13-14	OPT/COMP
TOTAL OPTIONAL ATHLETES				@ \$175.00	
TOTAL COMPULSORY ATHLETES				@ \$125.00	

**Please eMail and Mail this Elite National Qualifier form, along with a Separate Payment to:
 Rochester Classic – Elite Qualifier
 131 Despatch Drive
 East Rochester, NY, 14445**