

Double Mini Trampoline - Competition Card

Name:		Level:		Flight:	
Club:		Compeitor No:		Age Group:	
				Panel:	

PASS	Mount		Spotter		Dismount		Total
Q1 1							
Q1 2							
Q2							
F1							
F2							

This declaration must be made by the responsible coach who must be present at the event and qualified to the level of the gymnast's performance

Name of Coach _____

Qualification _____

Signature _____

BG Number _____

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