



## Champion Winter Challenge 2011

Dear Coaches,

I would like to invite each of you and your teams to participate in the seventh annual Champion's Winter Challenge. In the past, this weekend has been a great kickoff for the men's season, allowing the compulsories to have a great first competition and the optionals to get out in front of the judges with new skills and routines for the first time.

**Date:** Saturday, December 10, 2011 and Sunday, December 11, 2011

**Competition Levels:** Men's Level 4 through Level 10

**Location:**

Champion Gymnastics  
11100 Plantside Drive  
Louisville, KY 40299

Phone: 502.266.7447 or 502.809.1386

Fax: 502.267.7454

<http://teamgym.allaboutkids.cc/teamgym/Events/WinterChallenge/>

**Meet Director:**

Steven Fackler- [sfackler01@gmail.com](mailto:sfackler01@gmail.com)

**Equipment:**

Midwest Spring Floor  
Nissen Pommel and Mushroom  
AAI Rings  
Ultra Grip Vaulting Table onto a landing mat over Resi  
AAI Elite Parallel Bars  
AAI Highbar

**Meet entry fees:**

Compulsory (4-6) \$65  
Optional (8-10) \$75  
Team\* \$45  
\*Combined age groups for each level – with top 3 score

**Entry Deadline:**

November 4th, 2011

All entries received after the deadline must include a late fee of \$10.00 per entry (athlete or team award). All changes made to your entry after the deadline will be charged an additional \$10.00 per change.

**No refunds after the November 4<sup>th</sup> deadline.  
Make Checks payable to: Champion Gymnastics**

**Awards:**

All competitors will receive a t-shirt  
Event All-Around plaques given to each gymnast

**Concessions:** Hot & cold food provided by Champion's Booster Club

I hope all of you have a great start to your season! I am looking forward to seeing you and your programs in December! More information to come soon!

Sincerely,  
Steven Fackler  
Champion Gymnastics





Champion Winter Challenge 2011 Entry Form  
**Club Info**

Club Name: \_\_\_\_\_

Club Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Contact: \_\_\_\_\_

Coach 1: \_\_\_\_\_

USAG Number: \_\_\_\_\_ Safety Cert. Expiration: \_\_\_\_\_

Coach 2: \_\_\_\_\_

USAG Number: \_\_\_\_\_ Safety Cert. Expiration: \_\_\_\_\_

Coach 3: \_\_\_\_\_

USAG Number: \_\_\_\_\_ Safety Cert. Expiration: \_\_\_\_\_

Coach 4: \_\_\_\_\_

USAG Number: \_\_\_\_\_ Safety Cert. Expiration: \_\_\_\_\_