



**HIGH TECH CAMP REGISTRATION FORM**

*Athlete Name:* \_\_\_\_\_

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

*Phone Number:* \_\_\_\_\_

*Email Address:* \_\_\_\_\_

*Emergency Info:* \_\_\_\_\_

*Current Gym:* \_\_\_\_\_

*Coach Attending:* \_\_\_\_\_

*Level Competed in 2023 Season:* \_\_\_\_\_

*Amount Paid:* \_\_\_\_\_ *Check #* \_\_\_\_\_

*Make Checks Payable to  
GIRLS CO-OP Gymnastics  
3320 FOX HILL RD  
Easton , PA 18045*