

INJURY PETITION

Petitions will be accepted and reviewed for legitimate injuries.
Injury petitions are not a guarantee of approval or entry into the meet.
Please do not petition for other hardships not pertaining to the gymnasts physical competitive condition.

School: _____
Coach: _____
Phone: _____

Where we can reach you if needed on Feb. 11

Gymnast: _____

Grade: _____ Div: _____

Month and Year of injury: _____



What are you petitioning for? *Please check -* Division _____ Event(s) _____

Type of injury & treatment - Please explain with any helpful information

Has the gymnast been released by his/her doctor, trainer, school & parents? _____
This should be according to your school's policy on returning athletes after injury.

How many meets did the gymnast compete in prior to injury? _____

When was the last meet you did compete? - *and provide scoresheets from any meets.*

Date: _____ Vault _____ Bars _____ Beam _____ Floor _____

How many meets did the gymnast miss due to the injury/illness? _____

Did the gymnast compete in last year's season or PA Classic? _____

If so, what division? _____

Please list **major** skills you are hoping to compete at the PA Classic.

Parent signature: _____ Date: _____
Required

**Petitions for EXTENUATING circumstances will be considered. Submit all details available for consideration.
Submission of a petition does not guarantee approval or entry to the meet.**