

Calisthenics Association of SA

Application for Video Grading by Metropolitan Club Entrant Graceful/Solo/Duo Competition

Competitors Name: _____

Contact telephone number: _____

Email Address: _____

Description of Event competitor is attending that prevents them from grading in person:

Date of Event:

Location of Event:

Supervisor/Coach/Organiser of event. (e.g. School Principal, Sports Coach, Choir Master, Drama Teacher, Music Teacher.)

Name: _____

Contact Telephone Number: _____

Email Address: _____

I certify that the above information is correct and meets the criteria for video grading as per rule 27 in the CASA rules and the above-named competitor is participating interstate or overseas on the specified dates above.

Signature of Supervisor of Event: _____

Signature of Applicant or Parent if Applicant under 18yrs of Age:

_____ **Date:** _____

Form to be uploaded to myStage during the entry process. No late applications will be accepted