**German University Championships 2017 Trampoline
April 8th, 2017 in Tübingen**

**Entry Form Individual / Team Competition**

|  |  |
| --- | --- |
| University (Name, Address) |  |
| Contact person (Name, Email, Phone) |  |

*To:*

sportref@gwdg.de

**(scan and email, please)**

*Copy to:*

**Allgemeiner Deutscher Hochschulsportverband**

**Max-Planck-Straße 2**

**D-64807 Dieburg**

Fax: +49 6071 207578

|  |  |  |  |
| --- | --- | --- | --- |
| Surname, first name | Gen‑ der | Team[[1]](#footnote-1) | “Internal” competitor yes / no[[2]](#footnote-2) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Closing date for entries: 20th of March, 2017**

*University Representative*

**German University Championships 2017 Trampoline
April 8th, 2017 in Tübingen**

**Entry Form Synchro Competition**

|  |  |
| --- | --- |
| University (Name, Address) |  |
| Contact person (Name, Email, Phone) |  |

*To:*

sportref@gwdg.de

**(scan and email, please)**

*Copy to:*

**Allgemeiner Deutscher Hochschulsportverband**

**Max-Planck-Straße 2**

**D-64807 Dieburg**

Fax: +49 6071 207578

|  |  |
| --- | --- |
| **Gymnast 1** | **Gymnast 2** |
| **Surname** | **First name** | **Sex** | **Surname** | **First name** | **Sex** |
|  |  | F/M |  |  | F/M |
|  |  | F/M |  |  | F/M |
|  |  | F/M |  |  | F/M |
|  |  | F/M |  |  | F/M |
|  |  | F/M |  |  | F/M |

**Closing date for entries: 20th of March, 2017**

*University Representative*

1. Please indicate team number, if you are also participating in the team competition. [↑](#footnote-ref-1)
2. Please indicate (“yes”), if you were unable to perform a trampoline routine with a difficulty score of at least 2.6 prior to your first entry into university. [↑](#footnote-ref-2)