

2010 Optional State Gymnastics
Senior Information Sheet

First Name: _____

Last Name: _____

High School: _____

Club: _____

Level: _____ Years in Gymnastics: _____

Accomplishments:

Favorite memory from the sport:

What are your plans after you graduate?

Please include photo and submit to Twin City Twisters by March 10, 2010 for inclusion in the State Program. Bios and photos can either be emailed to tctmeets@comcast.net or mailed to Twin City Twisters, 9001 123rd Ave N, Champlin, MN 55316