

# Michigan - USA Gymnastics / Host Club SQM & State Meet Agreement 2011 - 2012

Please initial each statement below and sign this agreement to confirm your acceptance of the meet that you, as the Meet Director, have been granted by the MI – USAG Administrative Committee.

\_\_\_\_\_ The sanction will be applied for through USA Gymnastics Sanctions, 30 days or more prior to the date of the meet.

\_\_\_\_\_ The request for judges has been sent to MI-NAWGJ Head Assigner.

\_\_\_\_\_ A copy of the contract that has been signed by the Meet Director with the meet site facility you listed on your bid form to host your meet. (if meet site is different from the hosting club's gym). The contract must be sent to Jim Comiskey (SACC) and Lori Koch (JOC) by October 1, 2011 *or within 90 days of the meet being hosted.*

\_\_\_\_\_ A draw for competition sessions and event order will be executed with a USAG professional member that is not affiliated with the hosting club/team. If this member is not part of the MI USAG Committee or a member of the NAWGJ, the SACC must approve the non committee professional member.

\_\_\_\_\_ Meet information must be sent to the competing clubs *“13 or more days” prior to the meet date.*

\_\_\_\_\_ Send meet information to judges including: judges report time, hotel information, direction to the meet site and any other information that would be helpful to the judges *“10 or more days” prior to the meet date”.*

\_\_\_\_\_ Friday night meets will not be approved by the SACC, unless Saturday and Sunday sessions are full.

\_\_\_\_\_ Admission fees will not exceed the amount specified in the MI Rules & Policies booklet based on the type of meet you are hosting.

\_\_\_\_\_ Spectator seating and viewing will not be obstructed.

\_\_\_\_\_ Adequate meals will be provided for coaches and judges.

\_\_\_\_\_ All Award guidelines set by the USAG-Michigan SAC published in the Michigan R & P, and USA-Gymnastics will be adhered to.

\_\_\_\_\_ Adequate stocked and clean restroom facilities are available.

\_\_\_\_\_ Immediately following the meet, MD must work with the Meet Referee in processing the judge's checks and judges assigning fee.

\_\_\_\_\_ Include a “Meet Site Evaluation Form” in each coaches packet. (see attached form)

## **Within 24 hours:**

\_\_\_\_\_ We will mail a copy of the sanction report form to the USAG, Indianapolis, IN.

\_\_\_\_\_ We will mail to the RACC, a administration fee of *\$1.00 per each* Level 4, 5, 6, 7, 8, 9, 10 & Prep Opt gymnast competing in the MI SQM and/or State Meet we host.

Mail to: Bobbi Montanari, Region 5 Chairman, 2881 Scioto-Darby Executive Ct, Hilliard, OH 43026. (Check made payable to Region 5 USAG).

\_\_\_\_\_ Next Day Mail Level 9 &10 State Meet Results to: Connie Maloney - 132 E. Washington Street, Suite 700, Indianapolis, IN 46204 – Email: cmaloney@usa-gymnastics.org

\_\_\_\_\_ Next Day Mail or Fax Level 8, 9, &10 State Meet Results to Char Christensen, 1260 Churchbell Way, Columbus, Ohio 43235 Fax# 614 – 841 – 9188

\_\_\_\_\_ We will email Level 8 State Meet Results in a Microsoft excel format to:  
Jim Comiskey - Region 5- Email: mgtc@sbcglobal.net

**Within 48 hours:**

\_\_\_\_\_ We will mail to the SACC an administration fee of **\$1.00 per each** Level 5 & 6 gymnast competing in the MI SQM and/or State Meet we host (make check payable to: MI-USAG).

\_\_\_\_\_ We will mail to the SACC an administration fee of **\$2.00 per each** Level 7,8,9,10 & **Prep Opt** gymnast competing in the MI - State Meet we host (make check payable to: MI-USAG).

\_\_\_\_\_ We will email a copy of the sanction report form and a copy of the official score sheets signed by the MI – NAWGJ officials that judged our meet. Mail to Jim Comiskey - SACC and to the appropriate Level Rep.

\_\_\_\_\_ We will mail a copy of the Level 8,9,10 State Meet official score sheets signed by the MI – NAWGJ officials that judged our meet.: Bobbi Montanari, Region 5 Chairman, 2881 Scioto-Darby Executive Ct, Hilliard, OH 43026.

**Within 4 weeks:**

\_\_\_\_\_ We will email a financial report form to the MI-SACC.

\_\_\_\_\_ We will email legible scores and a copy of the certificate of sanction to all competing clubs and/or post it online at our Club Web Site or connect with Dave Begian, USAG-Michigan Education Coordinator and Web Site Manager for posting results on our State Web Site.

\_\_\_\_\_ A fee of \$10.00 will be charged to pro members that must have host club verify their USAG Professional status online with USAG at check in.

**Failure to fulfill this agreement will result in the possible rejection of future bids by the Michigan USAG - State Administrative Committee to host SQM's or State Meets.**

If any of the requirements above or any rules listed in the MI Rules & Policies or the USAG Rules and Policies are not met, every possibility will be made to relocate the meet in question. Please use this agreement (which serves as a contract between you, the Host Club and Michigan - USAG), the attached requirements as well as the entire Rules & Policies booklets as a check list to provide a quality meet.

Meet Director \_\_\_\_\_ Club \_\_\_\_\_  
(Sign)

Meet Director \_\_\_\_\_ Date \_\_\_\_\_  
(Print)

Please Return by: **October 1, 2011**

Please mail to: Jim Comiskey, MI - SACC - 1111 E. Wackerly Rd Midland MI 48642

# SQM & State Meet Site Evaluation

## Michigan USA Gymnastics

*Meet Directors: Place a copy in each coach's and judge's packet*

Meet Name: \_\_\_\_\_ Level & Type: \_\_\_\_\_ Meet Date(s): \_\_\_\_\_

Meet Location: \_\_\_\_\_ Meet Director: \_\_\_\_\_

*Rate each category from 1-10. (1 = poor, 10 = excellent).*

*Positive criticism is helpful for growth.*

*If there is a category that you have no knowledge of, or does not apply to you, please leave category blank.*

This evaluation will be used in future awarding of meet bids. Please try to use **FACTS** to support your evaluation. **FOR ALL RATINGS BELOW 4, PLEASE ELABORATE IN THE SPACE PROVIDED AND/OR ON THE BACK OF THIS FORM.** Please feel free to contact the appropriate MI -USA Gymnastics Committee Member if you have any questions. This form must be signed by a professional USAG member.

<b>CATEGORY:</b>	<b>RATING: 1 - 10</b>	<b>EXPLANATION:</b> <small>For a rating below 5, please elaborate in the space provided.</small>
Pre Meet Information Complete & Received On Time		
Schedule (convenient, efficient, etc.)		
Did Meet Run On Schedule?		
Parking		
Competition Area		
Equipment/Matting		
Awards		
Support Staff		
Meet Director's Understanding of R & P		
General Meet Operation		
Restrooms (Public Coaches) please circle		
Hospitality		

**Additional Comments:** (Use back if necessary)

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Signature \_\_\_\_\_ USAG Pro # \_\_\_\_\_ Coach  Owner  Judge

Printed Name \_\_\_\_\_ Club Affiliation \_\_\_\_\_

**Please send your evaluation to the MI USAG SACC and the appropriate Level Rep.  
(To insure your opinions are being heard, feel free to send a copy to any other board member):**

Please send to: Jim Comiskey 1111 E. Wackerly Rd. Midland MI 48642 Email: mgtc@sbcglobal.net Fax: 989-832-2278	Level Rep information can be found online at: <a href="http://www.michigangymnastics.com">www.michigangymnastics.com</a> or in your MI R & P
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