



USA GYMNASTICS.

New Jersey

William Psiuk 110 Fifth Ave. Bradley Beach, N.J. 07720
Fax (732) 988-1857 Cell (732) 682-5978 E-Mail billpsiuk@optimum.net

To: All Club Owner / Pro Members / Meet Directors

02 June, 2018

Subject: 2018/2019 Season Sectional and State Meets Bids.

Due August 1, 2018

Enclosed: Meet Calendar and Meet Bid form.

We invite you to submit your bids for the 2018 / 2019 New Jersey Sectional, State Meets. **Please E-mail or mail all entries to** William Psiuk 110 Fifth Ave., Bradley Beach, NJ 07720 Tel (732) 682-5978 or E-mail to billpsiuk@optimum.net

We will be selecting sites for each Sectional, and State Meet as indicated in part 1 of the general information. Note on the proposed meet dates that several sectional and State meets have been combined. All State Meets must be in an outside facility.

Sectional and State Meet Hosts: Please remember, Priority day for all Sectional and State Meets is Sunday with Saturday and Friday as an overflow date.

Also remember to obtain your meet sanction well ahead of your assigned meet. It is the Meet hosts responsibility to obtain the Sanctions for Sectionals and State Meets.

For all Sectional Meets New Jersey USA Gymnastics will provide the meet host with 1st to 3rd place A.A. medals only. It is the meet hosts responsibility to provide the Achievement award Ribbons. You will need to contact Jaime at A-1 Awards for this.

For all State Meets New Jersey USA Gymnastics will provide the meet host with Certificates, all Individual and Team Awards.

For all Sectional and State Meets New Jersey USA Gymnastics will pre pay and set-up the Beyond the Score program. USA-G N.J. will then bill the meet host after the meet is done.

Brant Lutska
NJ USA-Gymnastics SACC

Application to host a Sectional or State Championship Sanctioned by
U.S.A. Gymnastics-New Jersey

PART I: GENERAL INFORMATION

This application is submitted in the interest of hosting the following event to be conducted under the auspices of U.S.A. Gymnastics-New Jersey.

Please check:

_____ Level 2, 5 Xcel Bronze, Silver Sectional # 1	Date <u>Nov. 10-11, 2018</u>
_____ Level 3/4 Sectional # 1	Date <u>Dec. 8-9, 2018</u>
_____ Level 2, 5 Xcel Bronze, Silver Sectional # 2	Date <u>Dec. 15-16, 2018</u>
_____ Level 3/4 Sectional # 2	Date <u>Jan. 5-6, 2019</u>
_____ Level 2, 5 Xcel Bronze, Silver Sectional # 3	Date <u>Jan. 12-13, 2019</u>
_____ Level 3/4 Sectional # 3	Dates <u>Feb. 2 or 3, 2019</u>
_____ Level 2, 5 Xcel Bronze, Silver States	Dates <u>Feb 8 - 10, 2019</u>
_____ Level 3 / 4 States	Dates <u>Feb. 22 - 24, 2019</u>
_____ Level 6 - 7 Xcel Gold, Platinum, Diamond Sectional # 1	Date <u>March 9-10, 2019</u>
_____ Level 8 - 10 State	Dates <u>March 15 - 17, 2019</u>
_____ Level 6 - 7 Xcel Gold, Platinum, Diamond Sectional # 2	Date <u>April 6-7, 2019</u>
_____ Level 6 - 7 Xcel Gold, Platinum, Diamond States	Dates <u>April 26 - 28, 2019</u>

All State Meets must be hosted in an outside facility

Priority day for all Sectional and State Meets is Sunday with Saturday and Friday as an overflow date.

Note: You need to send a judges request to NJ NAWGJ (see **Coaches Handbook for the form or on the USAGNJ.com web-site**) payment must be made 30 day's prior to the meet date to avoid late fees.

Bids will only be accepted that use the provided meet bid form

E-Mail meet bid form to billpsiuk@optimum.net

The Sponsoring Organization of the Event will be:

Name _____

Address _____

City _____ State _____ Zip _____

The Chief Officer of the Sponsoring Organization is:

Name _____

Address _____

City _____ State _____ Zip _____

Telephone: Home _____ Work (_____)_____

E-mail: _____

The proposed Competition Meet Director will be:

Name _____

Address _____

City _____ Zip _____

Telephone: Home (____) __Work (____)__

E-mail: _____

USAG # _____ Safety Certification Exp Date _____ U100 _____

Background check Exp Date _____ Safe Sport _____

How many meets did you conduct in the last two years?

Local how many _____ **Sectional** _____ **State** _____

PART II: Facility Information

1. Name and Address of Facility or Arena:

Name _____

Address _____

City _____ State _____ Zip _____

Telephone: () _____ Contact Person: _____

2. Competition Facility Have you used this facility in the past Y ___ N ___

Type of floor surface:
(wood, carpet, tartan, cement, etc.)

Floor dimensions for competition set-up: __ square feet__

Spectator seating capacity: _____

Availability of: (check appropriate items)

_____ Sound System/Announcing System Type

_____ Locker rooms _____ Athlete Seating

_____ Trainer _____ Coaches Hospitality room

_____ Press/Media _____ Judges' Meeting room

_____ bath rooms _____ DVD player for base score

_____ Concessions Sales

3. Gym space available for Capitol/Modified Capitol Cup format

_____ Yes _____ No

Floor Dimensions: _____ square feet _____

4. **EQUIPMENT FOR ALL STATE MEETS MUST BE SUPPLIED BY MANCINO**
If not please explain

ALL STATE MEETS EQUIPMENT MUST BE AAI and PROVIDED BY MANCINO

5. Insurance
Please indicate insurance information for this event:

Name of Insurance Company: _____

Contact Person's Name: _____

Phone Number: () _____

Type of Coverage (Liability/Major Medical): both _____

Dollar Amount of Coverage for Each Type – Please List:

Can USA Gymnastics-New Jersey be named as additional named insured?

_____ Yes _____ No

PART III: Support Personnel

Please identify the availability and number of the following personnel:

_____ Athletic Trainer _____ Gymnast / Coaches sign in (**Must be an adult**)

_____ Medical Doctor _____ Audio Personnel

Scoring program being used at all Sectional and State Meets will be Beyond the Score

Beyond the score will be pre-paid by USA-G N.J. and billed to the meet host after the event.

Experienced Adult Scoring Personnel _____

_____ Score Runners Personnel

_____ Experienced Announcer

_____ Score Flashers Personnel

_____ Auxiliary Judges
(Timers, Linesmen, etc.)

PART IV: Travel & Accommodations

1. Hotel Accommodations

a) Hotel Name(s): _____

b) Rates per night: Single _____ Triple _____

 Double _____ Quad _____

 Local Tax Rate _____

c) Average price of meals:

 Breakfast: _____ Lunch: _____ Dinner: _____

2. Are restaurants within walking distance of official lodging site? ____

a. Average price of meals at nearby restaurants:

 Breakfast: _____ Lunch: _____ Dinner: _____

3. Will food be available at competition site? _____yes_____

 If not, what arrangements will be made? _____

PART V: Publicity

Which of the following can be expected:

Local Papers: _____

Advanced Press: _____

Comments: _____
