

# GIRL POWER! 2012

## LEOTARD ORDER FORM

### INDIVIDUAL ORDER

Gymnast Name	Phone
Club Name	Level
Leotard Size	Amt Due

### PAYMENT INFORMATION

\$36 per leotard

Checks only

Please put club name and personal phone number on check

Amount Paid	Check #

### MAIL OR FAX

Fax: 734-971-9631

4611 Platt Rd.  
Ann Arbor, MI 48108

CHILD	Chest	Waist	Hips	Girth	ADULT	Chest	Waist	Hips	Girth
XSC	20-23	18-20	21-23	37-39	PA	31-34	25-27	31-34	52-55
SC	22-24	19-21	22-24	40-42	SA	34-36	27-28	34-36	56-59
IC	24-26	20-22	24-26	43-45	MA	36-38	28-29	36-38	59-62
MC	26-28	22-24	26-28	46-48	LA	37-40	29-30	37-40	62-64
LC	28-30	24-25	28-30	49-51	XLA	39-42	30-31	39-42	64-66



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