

2017 SHORE CONFERENCE GYMNASTICS TOURNAMENT

TO: Athletic Directors/Coaches
FROM: Dorine Shapiro, Tournament Director
RE: SHORE CONFERENCE TOURNAMENT FORMAT
DATE: September 1, 2017

**** New changes for this year are highlighted in gray. All times after 9:30am are approximate.**

1. DATES, SITES AND TIME

- Saturday, October 28, 2017 at Brick Memorial High School gymnasium
- Registration and Bar settings: 8:45am – 9:30am

Timed Warm Ups9:30am – 11:45am
Officials meeting11:30am – 11:45am
Coaches meeting11:45am – 12:00pm
Competitors line up in auditorium12:00pm
March in12:15pm
Competition begins12:30pm
Awardsfollowing competition

2. GENERAL INFORMATION

- Admission will be \$3.00/adults, \$2.00/students and senior citizens.
- Refreshments will be sold. Please do not bring refreshments into the gym.
- All National Federation Gymnastic Rules will be in effect.
- At the registration table, please report all scratches.
- The gym will be open at 8:45am. **PLEASE DO NOT ARRIVE BEFORE 8:45am!** Your team may stretch and obtain bar settings. If settings are not obtained at this time, the setting time will be part of your warm-up. Official warm-ups will be from 9:30am – 12:00pm.
- **Warm-up details:** Each competitor will have 1½ minutes each on bars and beam. You may block this time if you wish, just inform the timer. Three vaults per gymnast will be permitted during warm-ups. (Please block with other teams according to vault height.) Floor will not be timed, please be cooperative with one another. Warm-ups will end on your first competition event.
- **One touch details:** A one-touch warm-up will be allowed at the beginning of each competition rotation at each event: 30 second one touch (may be blocked) on beam and on bars (at the gymnast's setting). Two vaults will be permitted during the one touch warm-up. (Please block with other teams according to vault height.) Three tumbling passes on floor will be permitted during one touch.

- A coach or assistant must be present when his/her team is on the equipment.
- There will be a coaches meeting at 11:45am. The location will be announced.
- A trainer is available.
- All protests must be filed in writing, to the meet referee, within 5 minutes after the recording of scores for that rotation.
- A score sheet will be posted and updated during the competition.
- ***THE ONLY OFFICIAL SCORE SHEET IS THE ONE AT THE HEAD TABLE.***
- Coaches are fully responsible for any valuables that their team members may have with them.
- Only competitors in that particular event and their high school coaches are permitted in the competition area.
- Only coaches, competitors and team members in uniform will be allowed to sit in the competitor's bleachers. This will be strictly enforced and it will be the responsibility of each coach to make sure each member of their team who will be sitting in the competitors' bleachers is in some type of uniform.
- If you have any problems, comments or suggestions, please don't hesitate to speak up. Things can't get better if we don't know what's wrong.

3. SELECTION PROCESS

- To complete individual event sheet online, you should record each gymnast's top 2 scores which should meet or exceed the qualifying score listed on the Individual Competition Entry Form.
- Coaches do not have to designate team competitors unless they have less than four (4) qualifiers. If a TEAM has more than four (4) individual qualifiers on an event and the coach wishes to put up a non-qualifier on that event, the non-qualifier's score must count towards the team score on that event.
- The team gymnasts do not need qualifying scores.
- The top 6 teams will be selected for the Shore Conference Championship. Your A.D. will be notified on Tuesday, October 24th if your team has qualified.
- **Alternate Route:** Having at least three (3) competitors attain individual qualifying scores in all four events in at least two interscholastic meets; i.e., dual meets, tri-meets, tournaments. Competitors need not be all-around. (Tri-meets and tournaments are considered one qualifying score for team and individual entries.)
- The selection of the top 6 teams will be based on the total of the top 3 scores each school submits.
- A tie will be decided by selecting the top scores of those teams.
- **A reminder to all coaches: Do not send in score sheets prior to the meet. Just bring them the day of the meet in case verification is needed.**

4. AWARDS

- Medals will be presented to the first 6 places in the individual events and in the All-Around, certificates will be presented for places 7-12 in the individual events and in the All-Around. A plaque will be presented for the team champion.

5. ENTRY FEE/DEADLINE

- All checks are to be made out to the ***SHORE CONFERENCE.***
- Individual competition will cost \$14.00 per event for each participant including the all-around. (i.e. all around cost \$70.00)
- Team competition will be \$40.00 per team. You can mail fee after notification.

All CHECKS must be sent to:

*Joe Montano, AD
Red Bank Catholic High School
112 Broad Street
Red Bank, NJ 07701*

DO NOT send check to Brick Memorial.

ALL FORMS ARE TO BE FILLED OUT ONLINE

ANY QUESTIONS:

*Dorine Shapiro – Tournament Director
Phone: (732) 972-1877*

The last day to qualify is Saturday, October 21st.

All completed entry forms must be entered online by Saturday, October 21st.

ADDITIONS will NOT be accepted past the deadline.

6. EQUIPMENT SPECIFICATIONS

- Vaulting Table - AAI
- Uneven Parallel Bars - AAI
- Balance Beam - Spieth Anderson Reflex
- Floor Ex - Spieth Anderson spring floor

SHORE CONFERENCE TOURNAMENT

ADMISSION ROSTER

THIS SCHOOL PERSONNEL FORM MUST BE FAXED **or** SCANNED AND EMAILED TO:

Dorine Shapiro - Fax # (732) 972-7676 (after 9:00 am please)

Or email to: DorineNJ@aol.com

by: **Tuesday, October 24, 2017**, to serve as a checklist for complimentary admission to the **GYMNASTICS** Shore Conference Tournament when your team is involved in the tournament.

PLEASE TYPE OR PRINT CLEARLY

HIGH SCHOOL _____

SUPERINTENDENT: _____

ASSISTANT SUPERINTENDENT: _____

PRINCIPAL: _____

ATHLETIC DIRECTOR: _____

COACHES: 1. _____

2. _____

MANAGER: _____

***PRINCIPAL'S SIGNATURE:** _____

***PRINCIPAL:** *Do not sign this form until all names have been entered.*

BRING A COPY OF THIS FORM WITH YOU TO THE TOURNAMENT.

SHORE CONFERENCE TOURNAMENT - INDIVIDUAL COMPETITION **WORK SHEET**

*submit your entry online: <https://sites.google.com/site/shoreconferencetournament/>

SCHOOL _____ HEAD COACH _____

COACH'S PHONE # _____ COACH'S E-MAIL _____

PLEASE LIST 2 SCORES FOR EACH EVENT AND TYPE NAMES ON SHEET.

Every gymnast will be charged \$14.00 for each event, including All Around. This includes team members without qualifying scores.

GYMNAST (PLEASE TYPE NAMES)	VAULT 8.6 or better score / date	BARS 8.1 or better score / date	BEAM 8.3 or better score / date	FLOOR 8.5 or better score / date	ALL AROUND <i>Check box only if qualified in all 4 events</i>	TOTAL \$14.00 per event
1.	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____		
2.	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____		
3.	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____		
4.	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____		
5.	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____		
6.	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____		
7	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____	1. _____ 2. _____		

* MUST BE SUBMITTED **ONLINE** BY SATURDAY, OCTOBER 21, 2017 - **DO NOT MAIL OR FAX THIS WORKSHEET**

* COACHES, DO NOT SEND IN SCORE SHEETS PRIOR TO THE MEET. BRING THEM WITH YOU TO THE MEET.

TOTAL \$ _____

SHORE CONFERENCE TOURNAMENT - TEAM APPLICATION WORK SHEET

***submit your entry online: <https://sites.google.com/site/shoreconferencetournament/>**

SCHOOL _____ HEAD COACH _____

COACH'S PHONE # _____ COACH'S E-MAIL _____

TOP 3 MEET SCORES

Opponent	Team Score	Date

PLEASE TYPE COMPLETE TEAM ROSTER

1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	

The top 6 teams will be selected to compete for the Shore Conference Championship. They will be selected based on the sum of the top 3 meet scores submitted. Your A.D. will be notified on *Tuesday, October 25th* if your team is one of the six.

***MUST BE SUBMITTED ONLINE BY SATURDAY, OCTOBER 21, 2017. - DO NOT MAIL OR FAX THIS WORKSHEET**

TEAM FEE IS \$40.00. (This fee will be due after notification).

SEND MONEY TO: Joe Montano, AD, Red Bank Catholic HS, 112 Broad Street, Red Bank, NJ 07701

DO NOT SEND CHECKS TO BRICK MEMORIAL

SHORE CONFERENCE VOUCHER



SCHOOL: _____

☐ DUES \$ _____

FALL

<input type="checkbox"/> Cross Country (Boys) Team \$ _____ Individual \$ _____	<input type="checkbox"/> Football Team \$ _____	<input type="checkbox"/> Soccer (Girls) Team \$ _____
<input type="checkbox"/> Cross Country (Girls) Team \$ _____ Individual \$ _____	<input type="checkbox"/> Gymnastics Team \$ _____ Individual \$ _____	<input type="checkbox"/> Tennis (Girls) Team \$ _____
<input type="checkbox"/> Field Hockey Team \$ _____	<input type="checkbox"/> Soccer (Boys) Team \$ _____	<input type="checkbox"/> Volleyball (Girls) Team \$ _____

WINTER

<input type="checkbox"/> Basketball (Boys) Team \$ _____	<input type="checkbox"/> Ice Hockey Team \$ _____	<input type="checkbox"/> Swimming (Boys) Team \$ _____ Individual \$ _____
<input type="checkbox"/> Basketball (Girls) Team \$ _____	<input type="checkbox"/> Indoor Track (Boys) Team \$ _____ Individual \$ _____	<input type="checkbox"/> Swimming (Girls) Team \$ _____ Individual \$ _____
<input type="checkbox"/> Bowling (Boys) Team \$ _____ Individual \$ _____	<input type="checkbox"/> Indoor Track (Girls) Team \$ _____ Individual \$ _____	<input type="checkbox"/> Wrestling Team \$ _____
<input type="checkbox"/> Bowling (Girls) Team \$ _____ Individual \$ _____		

SPRING

<input type="checkbox"/> Baseball Team \$ _____	<input type="checkbox"/> Lacrosse (Girls) Team \$ _____	<input type="checkbox"/> Track (Boys) Team \$ _____ Individual \$ _____
<input type="checkbox"/> Golf (Boys) Team \$ _____ Individual \$ _____	<input type="checkbox"/> Softball Team \$ _____	<input type="checkbox"/> Track (Girls) Team \$ _____ Individual \$ _____
<input type="checkbox"/> Golf (Girls) Team \$ _____ Individual \$ _____	<input type="checkbox"/> Tennis (Boys) Team \$ _____	<input type="checkbox"/> Volleyball (Boys) Team \$ _____
<input type="checkbox"/> Lacrosse (Boys) Team \$ _____		

☐ OTHER _____
\$ _____

TOTAL \$ _____

SIGNATURE OF ATHLETIC DIRECTOR _____

DATE _____