

IHSA Information

Girls Gymnastics

Call: (309) 663-6377 FAX: (309) 663-7479

Team Seeding Information -

(Due to IHSA Wednesday, January 13 – 4:00 p.m. Fax completed form to 309-663-7479.)

Instructions

1. Coaches must fax to the IHSA this completed summary sheet by the deadline listed above.
2. An average team score will be computed by the school entered, based on the seeding policy below.
3. After the summary sheets have been received, the IHSA Office will assign schools to regionals in accordance with Section VI. A. of the Girls' Gymnastics Terms and Conditions.
4. Regional hosts will be selected based on the process outlined in Section VI. A. of the Girls' Gymnastics Terms and Conditions. Schools interested in hosting regionals must submit the *Regional Host Consent Form* to the IHSA Office by the deadline listed above in order to be considered for hosting.

Seeding Policy

1. The scores used for team seeding shall be from gymnastics meets where the team score was determined by adding four (4) scores on all events.
2. Each team will average their top three (3) scores to come up with their seed score.
 - a) Dual or multiple meet scores can be used only once.
 - b) If a team competed in a meet that used three scores for team scoring, whether four or more competitors were used, that score can not be used as part of the seeding information.
3. Schools with individual competitors only will be assigned to a regional geographically following the sectional complex meeting. Schools with only individual competitors do not need to submit any form to the IHSA Office.

NOTE: If you submit your scores early and have a better score leading up to Jan 13, a new scoring form must be submitted to the IHSA. All scores submitted must be current.

Date	Name of Opponent/ Event	Your Team's Score
1. <input type="text"/>	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>	<input type="text"/>
Your Average Team Score/ Seeding Score		<input type="text"/>

This shall verify that the information submitted is in accordance with the Girls Gymnastics' Terms and Conditions Seeding Policy.

School _____ City _____

Coach submitting this report _____

Regional Host Consent for Girls Gymnastics

Complete this section only if your school is interested in hosting a regional.

We understand that determination of host schools for this year's Girls Gymnastics Regional Meets will be based on 3 factors:

1. The school will host at their school and on the predetermined date.
2. The school is able to provide a person and equipment needed to accommodate the computer scoring.
3. The school equipment and competition area meets National Federation standards.

Are your facilities compliant with the 2010 ADA standards or have you developed a transition plan?
 Yes No

If we are assigned to host the following person will serve as Meet Manager:

Name: _____

Title: _____

School Phone: _____

Cell Phone: _____

Email: _____

Signature of Principal or Athletic Director

Please ✓ the Sectional you have been assigned to, then indicate your preferred dates for hosting, eg. 1 st choice, 2 nd choice, 3 rd choice. If not available, indicate dates.	Monday, February 1	Tuesday, February 2	Wednesday, February 3	Thursday, February 4
TBA Sectional				
TBA Sectional				
TBA Sectional				
TBA Sectional				

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