



# ROUTINE REVIEW FORM - BUILDING

Program Name: \_\_\_\_\_

Team Name: \_\_\_\_\_

Level & Division: \_\_\_\_\_

# of Participants: \_\_\_\_\_ Performance: ROUND 1 ROUND 2

Coach: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

PLEASE INITIAL EACH BOX BELOW:

- I understand that all rulings are final.
- I understand that other teams cannot be discussed or reviewed.
- I understand that any additional infractions or scoring errors discovered will be assessed to the final score.

REVIEW OUR (CIRCLE ONE):      **STUNTS**      **PYRAMID**      **TOSSES**

I have an official response through the Scoring Inquiry form with the video attached to show AccuScore.

*Script your skills with the number of groups involved. List your skills exactly as they are listed in the level appropriate skills document.*

SKILLS	# OF GROUPS

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# OF ATH-LETES	NUMBER OF GROUPS		
	MAJOR-ITY	MOST	MAX
5 - 11	1	1	2
12 - 15	1	2	3
16 - 19	2	3	4
20 - 23	3	4	5
24 - 27	4	5	6
28 - 31	5	6	7
32 - 38	6	7	8

WORLDS MAX QUANTITY CHART	
DIVISION	# OF STUNTS
X-Small (5-16)	3
Small (17-22)	5
Medium (23-30)	7
Large (31-38)	9
Int. Open/Global (10-24)	5
Senior Open (5-24)	5
Int. Non-Tumbling (10-30)	6

WORLDS COED QUANTITY CHART	
# OF MALES ON TEAM	# OF STUNTS
1 - 3	1
4 - 5	2
6 - 7	3
8 - 9	4
10 - 11	5
12 - 13	6
14 - 19	7

AFTER REVIEW (OFFICIAL USE ONLY)       HONORED       DENIED

Event Staff Initial: \_\_\_\_\_ Time Reviewed: \_\_\_\_\_ Panel: \_\_\_\_\_