SPECIAL OLYMPICS RHYTHMIC GYMNASTICS



OPTIONAL ROUTINE LEVEL 4

Number: Name:					Delegation:			
Does this athlete have Down Syndrome? Yes 🗌 No 🗋 Diagnosed with Atlanto-axial instability? Yes 🗌 No 🗌								
Required Technical Skills (0.6 each)								
Split Leap	Pivot 360° - leg 45° or highe			igher Balance - leg 90° or higi			her Back Arch or Splits	
			or Leg Side Leg Back or		Leg Front or Leg Side			
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Required Apparatus Technical Skills (0.4 each)								
Ноор	High Toss or Throw 🦯		Rotations O		Passing through		Swing 00	
Ball	High Toss or Throw 🦯		Free roll on the body 0000		Active Bounce V		Balance on hand/swing ${\mathfrak O}$	
Clubs	High Toss or Throw 🦯		Mills X		Small Circles O		Swings 00	
Ribbon	High Toss(no echappe)		Snakes AVV		Spirals	ത്ത	Figure 8s/swings/circles	
Bonus (*)								
2 FIG body skills B or higher - FB (0.4) 1 FIG body skill C or higher - FC (0.4) Series of 4 Rhythmic Steps - s (0.4)								
High throw with rotation (must catch) - Z (0.4) High throw or catch during a large leap - Z (0.4)								
Series of 2 body skills (Max 2 series) - } (0.6 each series)								
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SCORE TABULATION					REQUI	REMENTS	COACH	JUDGE
BODY SKILLS					MAX 4.8			
APPARATUS TECHNICAL MOVEMENTS					MAX 1.6			
BONUS					MAX 3.2			
					0.4 10.00			
MAX TOTAL						0.00		

COACH SIGNATURE

JUDGE SIGNATURE_

Please refer to the document "Instructions for Filling Out Level 4 Optional Scripts" for directions on completing this form