

Steps to Register: Fax all forms to **413-778-6600**

1. Complete Registration Form
2. Complete Roster Form
3. Complete Medical Release Form per athlete(bring to event)
4. Complete Credit Card Authorization form
5. Mail in Payment



Thank you for competing with us!

2011 – 2012 Fun Dance® National Championship™ Individual Registration Form

Event Location: Freeman Coliseum, San Antonio, Texas

Event Date: April 1, 2012

Contact Name: _____

School/Organization Name: _____

Contact Home Phone: (____) _____

School/Org. Phone: (____) _____

Contact Cell Phone: (____) _____

School/Org. Address: _____

Contact Address: _____

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

School/Org. Fax: _____

Email Address: _____

Name of Head Coach: _____

Please list the division(s) for your individual competitors in the section below. Please include the name and number of competitors for each division. Cheer World® All-Access Championship™ will adhere to the Industry Standard Rules and Guidelines. For more information, please visit www.funcheer.com or call Ross Martin at (512) 388-3470.

Level (1-5)

Name/Division: _____ # of Competitors: _____

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Name/Division: _____ # of Competitors: _____

Name/Division: _____ # of Competitors: _____

Name/Division: _____ # of Competitors: _____

of Coaches/Advisors Attending: _____

Participant Fee: \$75.00

Spectator Fee: \$15.00

Parking Fee: \$5.00

Deadline: All Entries & Payments must be postmarked no later than March 20, 2012. Make Checks payable to: **Cheer Brands**.

Please fax all entry information to: 413-778-6600, then mail form and fees to:

Cheer Brands, Inc.
PO Box 3999
Cedar Park, TX. 78630

Policies:

I have read and agree to adhere to the Cheer World® All-Access Championship™ rules and regulations set forth in this registration. I also understand my entry will not be accepted unless this entry form and payment are received prior to the competition date.

Coach's Signature: _____ Date: _____

Parent or Guardian Signature: _____ Date: _____

Amount Enclosed (\$75 X # of Competitors): _____ Check/Money Order #: _____

Date mailed (Entry form and payment): _____

For Credit Card Payments, Please complete the Credit Card Authorization Form.