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

TEXAS★CHEERLEADER®

Thank you for competing with us!

Team Registration Form
Texas Cheerleader® Open State Championship

Event Location: Strahan Coliseum at Texas State - San Marcos **Event Date:** Sunday, January 18th, 2026

Contact Name: _____ School/Organization Name: _____

Contact Home Phone: (_____)_____ School/Org Phone: _____

Contact Cell Phone: (_____)_____ School/Org. Address: _____

Contact Address: _____ School/Org. Fax: _____

City:_____State:_____Zip:_____ City:_____State: _____Zip:_____

Name of Head Coach: _____ Email Address: _____

Please list the division(s) for your school or organization in the section below. Please include the Name of the team and number of participants on each squad. Texas Cheerleader® will adhere to the Industry Standard Rules and Guidelines. For more information, please visit www.texascheerleadermagazine.com or call Ross Martin at (512) 733-7716.

Level (1-5) All-Star – Schools (Novice, Intermediate, Advanced)

Name/Division:_____Level:_____# of Participants on Squad: _____

Name/Division:_____Level:_____# of Participants on Squad: _____

Name/Division:_____Level:_____# of Participants on Squad: _____

Name/Division:_____Level:_____# of Participants on Squad: _____

Name/Division:_____Level:_____# of Participants on Squad: _____

Name/Division:_____Level:_____# of Participants on Squad: _____

# of Coaches/Advisors Attending: _____ # of Cross- overs (C/O): _____

Participant Fee: $85 **Crossover Fee: $75** **Show Team: $50** Per Show Team Member **Spectator Fee: $20** **Parking Fee: $5**

Deadline: All Entries & Payments must be postmarked no later than **January 03, 2026**.

Make Cashier's Check payable to: **Texas Cheerleader**.
Please fax all entry information to: **413-778-6600**, then mail form and fees to:
Texas Cheerleader • PO Box 3999 • Cedar Park, TX 78630

Policies:

I have read and agree to adhere to the Texas Cheerleader® 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: ($85 x # of part + $75 x # of C/Os)_____Check/Money Order #: _____

Date mailed: (Entry form and payment) _____

For Credit Card Payments, please complete the Credit Card Authorization Form. Return it, along with this form to our office.