



## ALL-STAR CHEER CHAMPIONSHIP TEAM REGISTRATION FORM

ONE ENTRY FORM PER TEAM: DUPLICATE IF NEEDED  
PLEASE PRINT AND MAIL

GYM NAME: \_\_\_\_\_  
 TEAM NAME: \_\_\_\_\_  
 GYM ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 DIRECTORS'S NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

### REGISTRATION FEES:

NUMBER OF CHEERLEADERS \_\_\_\_ x \$12.00= \$ \_\_\_\_\_  
 (2 COACHES PER TEAM FREE)  
 1<sup>ST</sup> COACH: \_\_\_\_\_ 2<sup>ND</sup> COACH: \_\_\_\_\_  
 NUMBER OF CROSSOVERS, PER TEAM \_\_\_\_ X \$10.00= \$ \_\_\_\_\_  
 NUMBER OF ADDITIONAL COACHES \_\_\_\_ X \$10.00= \$ \_\_\_\_\_  
 TOTAL AMOUNT OF TEAM REGISTRATION: \$ \_\_\_\_\_ CHECKS MADE PAYABLE TO **NJCCA**

### LEVELS & DIVISIONS

<u>DIVISION</u>	<u>LEVEL</u>
____ TINY	____ 1
____ MINI	____ 2
____ YOUTH CHEER	____ 3
____ JUNIOR	____ 4
____ JUNIOR CO-ED	____ 5
____ SENIOR RESTRICTED	
____ SENIOR	
____ SENIOR CO-ED (LIST SIZE): _____)	
____ INTERNATIONAL OPEN CHEER	

I, \_\_\_\_\_ acknowledge the said rules and regulations governing the NJCDCA's State Championships. Any infraction of said rules, including but not limited to, unsportsmanlike conduct, will result in myself and the team being requested to leave the competition, thereby forfeiting our participating for the following year. I also forfeit any and all fees paid to the NJCDCA. All judging decisions are final.

Date: \_\_\_\_\_

Director's Signature: \_\_\_\_\_

**Send all entries to:**  
 NJCDCA STATE  
 CHAMPIONSHIP  
 C/o Pat DePalma  
 134 Pine Needle Street  
 Howell, NJ 07731

- Registration Check List:**
- \_\_\_\_ Completed & Signed Registration form
  - \_\_\_\_ Certificate of Insurance naming NJCDCA & SUN BANK ARENA
  - \_\_\_\_ Roster of team
  - \_\_\_\_ Individual Waivers
  - \_\_\_\_ Registration Fee(s)