

**Regional Cheer & Dance Championships Registration Form ★2009-10 Competition Series**

One Form PER EVENT please

Register by Mail (P.O. Box 280, Columbiana, OH 44408) Or Fax (1-800-864-3680) this form with credit card payment

**Section 1: TEAM NAME (School OR Gym Affiliation):**  
 \_\_\_\_\_  
 \_\_\_\_\_

City/State to be announced from:  
 \_\_\_\_\_  
 \_\_\_\_\_

**Section 2:**

TYPE OF REGISTRATION(S)  
*Check all that apply:*

<input type="checkbox"/> Cheer Squad	<input type="checkbox"/> Stunt Group (all girl)
<input type="checkbox"/> Dance Team	<input type="checkbox"/> Co-Ed Partner Stunt Team
	<input type="checkbox"/> Individual/Duo/Trio Cheer
	<input type="checkbox"/> Individual/Duo/Trio Dance

**Section 3: EVENT & PER PARTICIPANT FEE SCHEDULE (check one box):**

**FOAM FLOOR:**

<input type="checkbox"/> Sun. Nov. 15, 2009 at Berea High (Fall Frenzie)	<u>Early (\$15)</u> Nov. 2	<u>On-time (\$20)</u> Nov. 3-5	<u>Late (\$25)</u> Nov. 6
<input type="checkbox"/> Sun. Jan. 24, 2010 at Berea High (Spirit Celebration)	Dec. 28	Dec. 29-Jan. 11	Jan. 12-18

**SPRING FLOOR—Inaugural Events:**

<input type="checkbox"/> Sun. Dec. 6, 2009 at Robert Morris U. Moon Twp (Steel City Spirit Fest)	<u>Early (\$25)</u> Nov. 9	<u>On-time (\$30)</u> Nov 10-23	<u>Late (\$35)</u> Nov 24
<input type="checkbox"/> Sun. Mar. 7, 2010 at Baldwin-Wallace College (March Madness)	Feb. 1	Feb. 2-15	Feb. 16-22
<input type="checkbox"/> Sun. Apr. 18, 2010 at Robert Morris U. Moon Twp (Three Rivers Throw Down)	Mar. 15	Mar. 16-29	Mar. 30-Apr. 5

**SPRING FLOOR:**

<input type="checkbox"/> Sun. Dec. 13, 2009 at Canton Memorial Civic Center (Spirit Spectacular)	<u>Early (\$35)</u> Nov. 9	<u>On-time (\$40)</u> Nov. 10-23	<u>Late (\$45)</u> Nov. 24-Nov. 30
<input type="checkbox"/> Sun. Jan. 17, 2010 at Canton Memorial Civic Center (Chill Challenge)	Dec. 14	Dec. 15-28	Dec. 29– Jan. 4
<input type="checkbox"/> Sun. Feb. 14, 2010 at Canton Memorial Civic Center (Winter Classic)	Jan. 11	Jan. 12-Jan. 25	Jan. 26-Feb. 1
<input type="checkbox"/> Sun. Mar. 21, 2010 at Canton Memorial Civic Center (Spring Fling)	Feb. 15	Feb.16-Mar. 1	Mar. 2-8

**SPRING FLOOR—All Inclusive Pricing (no spectator fees):**

<input type="checkbox"/> Sun. Apr. 11, 2010 at University of Akron (Best of the Midwest)	<u>Early (\$50)</u> Mar. 8	<u>On-time (\$60)</u> Mar. 9-Mar. 22	<u>Late (\$65)</u> Mar. 23-Mar. 29
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**Section 4: Contact Information**

**MAIN CONTACT**

Head Coach \_\_\_\_\_

Fax # (do NOT leave blank) (\_\_\_\_\_) \_\_\_\_\_

Daytime Phone # (\_\_\_\_\_) \_\_\_\_\_

Evening Phone # (\_\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Home Mailing Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

**SECONDARY CONTACT**

Asst. Coach \_\_\_\_\_

Fax # (do NOT leave blank) (\_\_\_\_\_) \_\_\_\_\_

Daytime Phone # (\_\_\_\_\_) \_\_\_\_\_

Evening Phone # (\_\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_

**Section 5: Contact Information**

**GYM/SCHOOL/ORGANIZATION**

Mailing Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # (\_\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_

**Please proceed to PAGE 2 to complete your registration**

**QUESTIONS?**

**Visit our website at [www.AllStarCheerleadinginc.com](http://www.AllStarCheerleadinginc.com)**

**Call us at 1.888.577.5456 or (330) 482-5999**

**Email the Event Administrator:  
 Amy\_Clark@att.net**

**OTHER FEES:**

**CROSSOVER FEES for all events EXCEPT Best of the Midwest:**

The fee for each participant that is on 2 or more teams is half of the registration fee for which you qualify (based on your registration date). They will pay full price for the first team they are on and then the cross over fee for each additional team.

*(EXAMPLE: If you have a participant that is on 2 teams and you are attending the Spirit Spectacular and your registration is received on or before the EARLY deadline that participant pays \$35 for the first team and \$17.50 for each additional team)*

**CROSSOVER FEES for Best of the Midwest (ONLY):**

The crossover fee for each participant is as follows:

If you register by the **EARLY** deadline the fee is **\$15** for each additional team

If you register by the **ON-TIME** deadline the fee is **\$20** for each additional team

If you register by the **LATE** deadline the fee is **\$25** for each additional team

*(EXAMPLE: If you have a participant that is on 2 teams and your registration is received on or before the EARLY deadline that participant pays \$50 for the first team and \$15.00 for each additional team)*

**Solo & Small Group Events**

Individual Competition	\$20.00
Duo Competition	\$30.00 (total)
Trio Competition	\$45.00 (total)
Stunt Group	\$15.00 (per competitor)

**Section 6: Calculate your Registration Fee**

**Calculate your Registration Fee Due:**

Team Fees (complete attached participant breakdown)

# of First Teamers \_\_\_\_\_ @ \$ \_\_\_\_\_ (rate) = \$ \_\_\_\_\_  
 # of Cross Overs \_\_\_\_\_ @ \$ \_\_\_\_\_ (rate) = \$ \_\_\_\_\_

Solo & Small Group Events (complete attached participant breakdown)

# of Individuals \_\_\_\_\_ @ \$ 20.00 = \$ \_\_\_\_\_  
 # of Duo Groups \_\_\_\_\_ @ \$ 30.00 = \$ \_\_\_\_\_  
 # of Trio Groups \_\_\_\_\_ @ \$ 45.00 = \$ \_\_\_\_\_  
 # of Stunt Groups Participants \_\_\_\_\_ @ \$ 15.00 = \$ \_\_\_\_\_

**TOTAL DUE** = \$ \_\_\_\_\_

Mail Completed Registration form and Fee Payable to:

**All-Star Cheerleading**  
 PO Box 280,  
 Columbiana, OH 44408

You may also pay by credit card by completing the Credit Card Authorization Form.  
 Registration fees with credit card payment can be mailed to the address above  
 or faxed to 1.800.864.3680



## TEAM REGISTRATION FORM

Gym, School or organization \_\_\_\_\_

Event Date \_\_\_\_\_ Event Name \_\_\_\_\_

	Team Name	Registration Code	Age Division	USASF Level	Total # on team	1 <sup>st</sup> Teamers	Cross Overs
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
<b>TOTALS</b>							



## INDIVIDUAL/SPECIALTY GROUP REGISTRATION FORM

Gym, School or organization \_\_\_\_\_

Event Date \_\_\_\_\_

	Enter Individual or Group Member Names	Registration Code	Stunting or Tumbling Level (USASF) or Dance team category (pom, funk, jazz, lyrical)	Registration Fee Due
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
			<b>TOTALS</b>	

**Registration Fees:**  
 Individuals                 \$20.00  
 Groups                       \$15.00 per participant

*\* Same registration fee applies no matter what date you register*

Total Entry Fee Due  
 (Individual/Group Registration) \$ \_\_\_\_\_



### Credit Card Payment Form

Due to increased credit card security – we ask that you complete the following to make a purchase by credit card. For your protection and the protection of your account, the information you provide us must match the information your credit card issuer has on file.

Credit Card Account # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Security Code (numbers located on the back of your credit card where you sign your name) \_\_\_\_\_

Expiration Date \_\_\_\_\_

Name as it Appears on Card \_\_\_\_\_

Address where you receive your monthly credit card statement (usually your home address):

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone of Card Holder \_\_\_\_\_

Cell Phone of Card Holder \_\_\_\_\_

Amount to charge \_\_\_\_\_

Your Signature as authorization to charge above amount only: \_\_\_\_\_

#### **CARD HOLDER PLEASE COMPLETE THIS BOX**

Gym/School/Organization Name \_\_\_\_\_

Event you are registering for:

Date \_\_\_\_\_ Event Name \_\_\_\_\_

Would you like us to keep this CC information on file for future use? YES NO