

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



Team Registration Form **Fun Cheer® Winter Wonderland™**

Event Location: New Braunfels Convention Center

Event Date: Sunday, December 12th, 2021

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. Fun Cheer® 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) 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 Crossovers (C/O): _____

Participant Fee: \$60

Crossover Fee: \$50

Show Team: \$50

Spectator Fee: \$15

Parking Fee: Free

Per Show Team Member

Deadline: All Entries & Payments must be postmarked no later than **November 15, 2021**

Make Cashier's Check payable to: **Fun Cheer.**

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

Fun Cheer • PO Box 3999 • Cedar Park, TX 78630

Policies: I have read and agree to adhere to the Fun Cheer® 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: (\$60 x # of part + \$50 x # of C/Os) _____ Check/Money Order #: _____

Date mailed: (Entry form and payment) _____

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