

POWER DANCE NATIONAL DANCE TEAM(S) REGISTRATION

Fax Registration, Roster & Code of Conduct to: (281) 339-2976, 4 weeks prior to the competition.

MAIL COMPLIANCE FORMS - DO NOT FAX!

Mail or Overnight to: American Cheer Power 201 Spruce Dickinson, TX 77539

*Checks will only be accepted 3 weeks prior to competition from Gyms, Schools, Booster Clubs or Sponsors made payable to American Cheer Power®
NO INDIVIDUAL CHECKS.

Note: A cashier's check, money order or credit card WILL BE THE ONLY FORMS OF PAYMENT ACCEPTED 2 WEEKS PRIOR TO THE COMPETITION!

PLEASE DOWNLOAD CREDIT CARD AUTHORIZATION FORM FROM WEBSITE AND FAX TO: (281) 339 - 2976

Please Check One	<input type="checkbox"/> Power Dance Mini Nationals - 1/23 & 24/10	<input type="checkbox"/> Power Dance Nationals West - 2/27 & 28/10	<input type="checkbox"/> Power Dance Nationals South - 3/13 & 14/10	<input type="checkbox"/> Power Dance Nationals North -3/27&28/10
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SPECTATOR FEE -- WEEKEND PASS-\$30 DAY PASS-\$20 10 & YOUNGER - FREE 60+ - FREE

PLEASE CHECK IF YOU ARE ENROLLED IN THE VARSITY FAMILY PLAN:

PLEASE PRINT

Gym/School Name _____	Coach's Name _____
Gym/School Address _____	City _____ State _____ Zip _____
Gym/School Mailing Address _____	City _____ State _____ Zip _____
Coach's email _____	Coach's Day(cell) # _____ Gym/School # _____ Fax # _____

PLEASE PROVIDE CONTACT INFORMATION FOR THIS COMPETITION BELOW (IF DIFFERENT FROM ABOVE):

Contact Name _____	Contact Day(cell) # _____	Contact Email _____
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NO ADDS OR CHANGES WILL BE ACCEPTED THE WEEK OF THE COMPETITION!

Team # Please use this number on the Roster	Name of Team	All Star Dance Studio Rec League Public/Private School	DANCE CATEGORY Jazz, Hip-Hop, Pom, Lyrical, Prop, Variety, Open NON-COMPETING Show, Exhibition, Special Athlete	Age Division (See Guidelines)	Please list how many Crossovers you have on each team	# of boys	Total # on team
1	<u>EX:</u> Treasure Planet Youth Blue	All Star	Pom	Youth		0	24
2	<u>EX:</u> Treasure Planet Jr Hip-Hop	All Star	Hip-Hop	Junior	2	0	18
1							
2							
3							
4							
5							
6							
7							
8							

Total number of athletes participating in team events: #

LIST SCHEDULING CONFLICTS HERE:

EARLY BIRD-\$119 per Participant UP to TWO Routines (same Team)- If Registered & paid 3 weeks prior to event	# ____ x \$ ____ per participant	\$
ON-TIME - \$129 per Participant UP to TWO Routines (same Team) - If Registered & paid 2 weeks prior to event	# ____ x \$ ____ per participant	\$
LATE FEE - \$134 per Participant Up to TWO Routines (same Team) - If Registered within 1 weeks of event		
\$35 per Participant for 3rd or more Routines (same Team)	# ____ x \$35 per participant	\$
CROSSOVER	# ____ X \$50 per participant each additional team	\$
SPECIAL ATHLETE TEAM	# ____ X \$0 per participant	\$0.00
SHOW TEAM	# ____ X \$79 per participant	\$
PARENT CHALLENGE TEAM (Includes: Competition Fee, Spectator Pass, T-shirt & Team Trophy)	# ____ X \$55 per parent on team # ____ of Coaches participating FREE	\$
	Coaches Passes	#
INDIVIDUAL TOTAL: FROM NATIONAL INDIVIDUAL REGISTRATION FORM (WEST COAST & NORTHEAST NATIONALS ONLY)		\$
SUB-TOTAL		\$
DEDUCT -3rd Family Member Discount (Note: Each member must be marked on roster(s) to receive the \$25 discount) # ____ X \$25		-\$
Sponsored Athlete(s) (1 per Team) AT HALF PRICE OF THE FEE, ie Early Bird \$59.50; OnTime \$64.50; Late Fee \$67	# ____ x \$ ____ per participant	-\$
TOTAL		\$

FOR OFFICE USE ONLY Tables: _____ Data: _____ Ros: _____ Pay: _____ Sch: _____ Other: _____