



# FCDA CHEER & DANCE CHAMPIONSHIP COMPETITION REGISTRATION FORM



www.FCDA.net	239-596-6000 or 1-888 GOT FCDA	Area Rep: _____
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### Team Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City,St,Zip \_\_\_\_\_

School Phone: \_\_\_\_\_

School Fax: \_\_\_\_\_

School Email: \_\_\_\_\_

**SOUTH FLORIDA SIZZLER  
CORAL SPRINGS GYMNASIUM  
2501 Coral Springs Dr., Coral Springs, FL  
FEBRUARY 18, 2012**

### Competition Information:

List the division/category in which you will have teams competing along with the number of members in each performance. Divisions & Categories are listed on our website, examples (AllStar Sr Lev 1) (School Varsity) (Jazz, Age 9-10) (HipHop Age 13-14)

DIVISION	# on team
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

\_\_\_\_\_ number of participants @ \_\_\_\_\_ = \_\_\_\_\_

\_\_\_\_\_ number of crossovers\* @ **\$39** = \_\_\_\_\_

TOTAL AMOUNT = \_\_\_\_\_

TOTAL AMOUNT DUE = \_\_\_\_\_

#### EVENT PRICING:

payment postmarked by December 18 - \$49 per participant

payment postmarked by January 18 - \$54 per participant

payment after January 18 - \$59 per participant

2 coaches are given free entry per team, this does not include individuals, solo, duet, trio and stunt groups competitions.

\* NOTE: Individual, Duet, Stunt Group competitors are not crossovers. You are not considered a crossover when going cheer to dance. Please note that the crossover policy can only be used within the same program. If a participant is competing with 2 different organizations (example: allstar & high school team) the crossover discount does not apply.

### Coach/Sponsor Contact Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City,St,Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Fax number: \_\_\_\_\_

Email: \_\_\_\_\_



### Checklist

Send Completed Form along with payment to:  
 By Mail: \_\_\_\_\_ By UPS/FedEx: \_\_\_\_\_  
 FCDA \_\_\_\_\_ Call our office for  
 P.O. Box 151253 \_\_\_\_\_ overnight delivery  
 Cape Coral, FL 33915 \_\_\_\_\_ address

Please send in ONE payment per organization.  
 Individual checks will not be accepted.  
 payment postmarked by December 18 - \$49 per participant  
 payment postmarked by January 18 - \$54 per participant  
 payment after January 18 - \$59 per participant

All participants must have signed liability waivers /medical release (available on website).

This form must be signed by coach / authorized contact.

### Cancellations & Refunds

A Full Refund will be given if cancellation is received in writing 30 days prior to the event date. NO EXCEPTIONS. **I have read and agree to the Cancellation & Refund policy above. I, my parents, my coaches, and my team, will abide by the "FCDA code of conduct" which is posted on the FCDA website.**

Signature \_\_\_\_\_ Date \_\_\_\_\_