

# COMPETITION REGISTRATION FORM PRAIRIE PROVINCIALS | OPEN TEAM

**ALL INFORMATION ON THIS SHEET  
MUST BE FILLED OUT CORRECTLY TO  
BE ACCEPTED**

CLUB TEAM NAME (please print) \_\_\_\_\_

CONTACT PERSON (please print) \_\_\_\_\_

HOME PHONE (mandatory) \_\_\_\_\_

FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

HOME ADDRESS (please print) \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

## PRAIRIE PROVINCIALS REGISTRATION\*:

Athletes PREMIUM PACKAGE: \_\_\_\_\_ x \$70.00\* ea. = \_\_\_\_\_  
(competition + banquet)

Athletes BASIC PACKAGE: \_\_\_\_\_ x \$40.00\* ea. = \_\_\_\_\_

Coaches/advisors attending competition: \_\_\_\_\_

People attending BANQUET ONLY: \_\_\_\_\_ x \$30.00\* ea. = \_\_\_\_\_

### NON-MEMBER TEAMS

Athletes PREMIUM PACKAGE: \_\_\_\_\_ x \$80.00\* ea. = \_\_\_\_\_  
(competition + banquet)

Athletes BASIC PACKAGE: \_\_\_\_\_ x \$50.00 ea. = \_\_\_\_\_

Coaches/advisors attending competition: \_\_\_\_\_

People attending BANQUET ONLY: \_\_\_\_\_ x \$30.00\* ea. = \_\_\_\_\_

TEAM ROSTER ATTACHED?  YES (mandatory)

Ensure you have previously submitted an Athlete Registration & Waiver form for each team member and that you have provided a team roster.

\* PLEASE FILL OUT REGISTRATION FORM FOR EACH TEAM.

\*\* LATE FEE| \$45.00 PER PARTICIPANT FOR REGISTRATIONS RECEIVED AFTER THE DEADLINE.

## COMPETITION INFORMATION

**PRAIRIE PROVINCIALS | Saturday, April 22, 2017**

Location TBD

- Cash canteen available.
- School teams compete in the morning and Open teams compete in the afternoon.
- M.A.C. fees, team registration and payment must be received to be eligible to compete.

## REGISTRATION INFORMATION

This competition is run by M.A.C. and ALL CHEQUES must be made payable to M.A.C. **Participant registration increases to \$45.00 per participant for registrations received after the deadline.** Late registrations ONLY include competition entry. They will not receive other items offered in the Premium Package. For questions, please call the M.A.C. office at (204) 888-0317.

Send completed registration and payment to: **M.A.C. Office| 283 Berry Street | Winnipeg, MB | R3J 1N3**

**REFUND/CANCELLATION POLICY|** M.A.C. will retain 50% of fees if cancelled prior to the deadline and team will receive the balance as a credit to be used within the current cheerleading season. Cancellations received after the deadline will not be refunded.

**REGISTRATION DEADLINE IS 10 PM, FRIDAY, March 31, 2017**

I \_\_\_\_\_, have read and understand all of the above procedures for all M.A.C. competitions.

**SIGNATURE:** \_\_\_\_\_



CATEGORY REGISTRATION: (check all that apply)

- CHEER ROUTINE  STUNT GROUP  PARTNER STUNT  
 TUMBLING  HIP HOP DANCE

DIVISION:

### OPEN TEAMS

Refer to USASF/ISF Age Grid and indicate LEVEL choice in shaded area beside category.

- MINI  
 YOUTH  
 JUNIOR  
 SENIOR  
 FEMALE  
 MALE  
 CO-ED  
 18+  
 FEMALE  
 MALE  
 CO-ED

**STUNT GROUP:** List names below. (list additional groups on the back)

NAMES   Group 1	NAMES   Group 2
1 -	1 -
2 -	2 -
3 -	3 -
4 -	4 -
5 -	5 -
GROUP LEVEL:	GROUP LEVEL:

**PARTNER STUNT GROUP** (max. 1 grp): List names below.

1- \_\_\_\_\_  
 2- \_\_\_\_\_

**TUMBLING**  INDIVIDUAL  DUO : List names below.

1- \_\_\_\_\_  
 2- \_\_\_\_\_



# OFFICIAL TEAM ROSTER

List all team members below by name with their current grade. Coaches must fill out an Official Team Roster for EACH team entered in the competition and submit it with the team registration and fees by the deadline. ONLY four passes will be provided for coaches and school/club staff members. All teams must have verification for each member from the school they are enrolled in, verifying grade and registration. Please PRINT all information clearly and keep a copy for your records. Be sure to report all changes to M.A.C. prior to the competition.

TEAM & SCHOOL NAME: \_\_\_\_\_

HEAD COACH: \_\_\_\_\_ CONTACT PHONE: \_\_\_\_\_

EMAIL (required): \_\_\_\_\_

**\*PLEASE PROVIDE COACH'S NAME AND CONTACT NOT ADVISOR\***

By submitting this form I verify that each member of the team has personal accident insurance & submitted a team waiver an insurance fee.

COACH'S SIGNATURE: \_\_\_\_\_

Below, please fill out each athlete's name, their grade, and the Prairie Provincial Cheerleading Championship package they registered for in the boxes: **B = Basic** **P = Premium**

ATHLETE'S NAME	GRADE	PKG	ATHLETE'S NAME	GRADE	PKG
1. _____			19. _____		
2. _____			20. _____		
3. _____			21. _____		
4. _____			22. _____		
5. _____			23. _____		
6. _____			24. _____		
7. _____			25. _____		
8. _____			26. _____		
9. _____			27. _____		
10. _____			28. _____		
11. _____			29. _____		
12. _____			30. _____		
13. _____			31. _____		
14. _____			32. _____		
15. _____			33. _____		
16. _____			34. _____		
17. _____			35. _____		
18. _____			36. _____		

MANDATORY ATHLETE REGISTRATION & WAIVER FORM MUST be sent in for each athlete with the Competition Registration. If you have added participants make sure to send their waiver and insurance fee.

COACH(ES) & ADVISOR/ADMINISTRATOR NAMES: \_\_\_\_\_