

COMPETITION REGISTRATION FORM PRAIRIE PROVINCIALS | SCHOOL TEAM

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

SCHOOL / TEAM (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 POM ROUTINE PARTNER STUNT
 GROUND BOUND STUNT GROUP TUMBLING
 HIP HOP DANCE

DIVISION:

SCHOOL TEAMS

LEVEL CHOICE (Refer to USASF/ISF Age Grid)

- JUNIOR LEVEL 1 LEVEL 2 LEVEL 3
 SENIOR
 FEMALE LEVEL 3 LEVEL 4.0 LEVEL 5
 MALE LEVEL 4.2
 CO-ED
 UNIVERSITY/ COLLEGE
 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: _____