



# 20<sup>th</sup> Annual Cheerleading Competition

*Wayne Valley High School*  
*551 Valley Rd., Wayne, NJ 07470*

Sunday, January 27, 2019

Start Time: 9:00 AM

## **Event Information:**

General Admission: \$10.00

Senior Citizens Ages 65+: \$7.00

Children Ages 13-6: \$7.00

Ages 5 and Under: FREE

## **Team Registration:**

	<b>On-Time</b> (Paid by 1/13/19)	<b>Late</b> (Paid by 1/20/19)
<b>First Team/Division</b>	\$150	\$170
<b>Each Additional Team/Division</b> (from the same program)	\$130	\$150
<b>Special Needs Teams</b>	FREE	FREE
<b>Exhibition</b>	\$75	\$75

## **Team Information:**

- 2 1/2 minute maximum routine
- All-Star divisions follow USASF safety guidelines.
- Recreation divisions will select either NFHS or USASF Rules
- High School divisions will follow National Federation Rules.
- ***Routines will be performed on a 54'x42' spring floor***
- Separate performance, tumble track, and warm up gyms
- Professional judging will be provided
- Mat and start times will be sent via email by the Wednesday before the competition. No changes will be made after Friday before the competition.
- Music Compliance form must be signed and returned. The head coach/program director should be able to produce all music licenses upon request.
- Each athlete must have a signed medical waiver in order to compete.



**Registration Deadline: January 20, 2019**

**NO REFUNDS**

**For additional information, please call Amanda Romero at (973) 575-1999 or send an email to [justcheerallstars@gmail.com](mailto:justcheerallstars@gmail.com)**

***JuST Cheer All-Stars Competition Rec/HS Registration:***

Name of Organization:
Contact Name:
Address:
Phone Number:
Email:

***Please check or circle all divisions you are entering:***

**Recreation Divisions:**

2 <sup>nd</sup> & Under	# of Athletes: _____	Circle <u>One</u> : NFHS or USASF
4 <sup>th</sup> & Under	# of Athletes: _____	Circle <u>One</u> : NFHS or USASF
6 <sup>th</sup> & Under	# of Athletes: _____	Circle <u>One</u> : NFHS or USASF
8 <sup>th</sup> & Under	# of Athletes: _____	Circle <u>One</u> : NFHS or USASF
12 <sup>th</sup> & Under All-Girl	# of Athletes: _____	Circle <u>One</u> : NFHS or USASF
12 <sup>th</sup> & Under Co-Ed	# of Athletes: _____	Circle <u>One</u> : NFHS or USASF
Exhibition	# of Athletes: _____	Division:



**Grammar Divisions:**

4 <sup>th</sup> & Under	# of Athletes: _____	Circle <u>One</u> : Cheer/Dance or All-Music
6 <sup>th</sup> & Under	# of Athletes: _____	Circle <u>One</u> : Cheer/Dance or All-Music
8 <sup>th</sup> & Under	# of Athletes: _____	Circle <u>One</u> : Cheer/Dance or All-Music
Exhibition	# of Athletes: _____	Division:

**High School Divisions:**

Intermediate Varsity (Up to 36)	# of Athletes: _____	Circle <u>One</u> : Cheer/Dance or All-Music
Co-ed Intermediate Varsity (Up to 36)	# of Athletes: _____	Circle <u>One</u> : Cheer/Dance or All-Music
Small Varsity (12 or less)	# of Athletes: _____	Circle <u>One</u> : Cheer/Dance or All-Music
Medium Varsity (13-16)	# of Athletes: _____	Circle One: Cheer/Dance or All-Music
Large Varsity (17-20)	# of Athletes: _____	Circle One: Cheer/Dance or All-Music
Mega Varsity (21-28)	# of Athletes: _____	Circle One: Cheer/Dance or All-Music
Super Varsity (29-36)	# of Athletes: _____	Circle One: Cheer/Dance or All-Music
Small Co-ed Varsity (1-4 Males)	# of Athletes: _____	Circle One: Cheer/Dance or All-Music
Large Co-ed Varsity (5+ Males)	# of Athletes: _____	Circle One: Cheer/Dance or All-Music
Exhibition	# of Athletes: _____	Division:

Amount Enclosed: \_\_\_\_\_ (no refunds for no-shows)

Make checks payable to:

**JuST Cheer 40B Pier Lane West Fairfield, NJ 07004**



***JuST Cheer All-Stars Competition All-Star Registration:***

Name of Gym:
Contact Name:
Address:
Phone Number:
Email:

**Please check or circle all divisions you are entering:**

**All Star Division:**

<b>Tiny</b> (5-6 years old)	Level 1					
<b>Mini</b> (5-8 years old)	Level 1	Level 2				
<b>Youth</b> (5-11 years old)	Level 1	Level 2	Level 3	Level 4	Level 5R	Level 5
<b>Junior</b> (5-14)	Level 1	Level 2	Level 3	Level 4	Level 5R	Level 5
<b>Senior</b> (11-18)	Level 1	Level 2	Level 3	Level 4		
<b>Senior Co-ed</b> (11-18 years old) 1 or more males			Level 3	Level 4		
<b>Senior</b> (11-18 years old)				Level 4.2		
<b>Senior Restricted</b> (10-18) 0-4 males					Level 5R	
<b>Senior</b> (12-18 years old,)						Level 5
<b>Senior Co-Ed</b> (13-18 years old)						Level 5
<b>Senior Open</b> (14 years and older)				Level 4		Level 5
<b>Senior Open Co-ed</b> (14 years and older)						Level 5
Exhibition Division:	Level 1	Level 2	Level 3	Level 4	4.2/ 5R	Level 5

**\*\*Please list number of athletes under selected level\*\***



**ALL STAR PREP :**

<b>Tiny</b> (5-6 years old)	Level 1.1			
<b>Mini</b> (5- 8 years old)	Level 1.1	Level 2.1		
<b>Youth</b> (5- 11 years old)	Level 1.1	Level 2.1	Level 3.1	Level 3.2
<b>Junior</b> (5-14 years old)	Level 1.1	Level 2.1	Level 3.1	Level 3.2
<b>Senior</b> (10-17 years old)	Level 1.1	Level 2.1	Level 3.1	Level 3.2
Exhibition:				

**ALL STAR NOVICE:**

<b>Tiny</b> (3-6 years old)	1 w/ Restrictions		
<b>Mini</b> (5- 8 years old)	Level 1	Level 2	Level 3
<b>Youth</b> (5- 11 years old)	Level 1	Level 2	Level 3
<b>Junior</b> (5-14 years old)	Level 1	Level 2	Level 3
<b>Senior</b> (10-17 years old)	Level 1	Level 2	Level 3
Exhibition:			

Amount Enclosed: \_\_\_\_\_ (no refunds for no-shows)

Make checks payable to: **JuST Cheer 40B Pier Lane West Fairfield, NJ 07004**



## Medical Consent and Waiver Form

Each team member must submit a completed form.

Team: \_\_\_\_\_

Cheerleader's Name: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

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

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

Parent/Guardian Work Cell #: \_\_\_\_\_

Parent Email Address: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact Phone #: \_\_\_\_\_

I, \_\_\_\_\_, give my child \_\_\_\_\_ permission to participate in the JuST Cheer Cheerleading Competition. I am aware of the obvious risks involved in the sport of cheerleading. I realize that all necessary precautions will be taken. I give consent that if an accident should occur, my child may be taken to a medical facility and be treated if necessary. The JuST Cheer Cheerleading Program, the Wayne School District, Wayne Valley High School, the Wayne Board of Education and the coaches are not liable for any injuries sustained at the competition.

X \_\_\_\_\_

Parent/Guardian Signature

Date: \_\_\_\_\_



## Music Compliance Form

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

Team Division: \_\_\_\_\_

Coach's Name: \_\_\_\_\_

The use of music and other elements of the recording in your cheer and dance routine, as well as the right to perform your routine to that recording, must be properly licensed. You are responsible to and must obtain those licenses at your sole cost and expense, and by registering your team to participate in a competition you warrant and represent that you have properly obtained and will continue to maintain all such licenses. Failure to obtain the appropriate licenses may be a violation of U.S. copyright law. Teams must be able to provide proof of licensing upon request. There is no need to send your receipts in with your registration but you should carry it with you to the competition.

This is to confirm that I am compliant with the music guidelines set forth by USA Cheer.

[www.usacheer.net/music](http://www.usacheer.net/music).

X \_\_\_\_\_

Date: \_\_\_\_\_

Coach's Signature

**40B Pier Lane West Fairfield, New Jersey 07004 Phone (973) 575-1999**