



2019 ATLANTIC SPIRIT DECLARATION FORM

REGION: **ATLANTIC**

CONFERENCE:

ASSOCIATION:

INSTRUCTIONS: The Association Director must complete this form and forward to the Conference Director by **SEPTEMBER 10, 2019**. Once the Conference Director obtains all the appropriate signatures and reviews/approves the form it will then be sent to the Regional Cheer & Dance Director no later than **SEPTEMBER 15, 2019**. These declarations are then due to the National AYC Cheer Commissioner by **September 22, 2019**. **Please note this serves as your registration form for the ATL Region Cheer Competition and required registration fee. Signing this form confirms you are agreeing to pay the registration fee to the Region event host regardless of your teams ability to travel. A copy of your roster is required to accompany this form for review and approval.**

Division	Head Coach	Participation	Category	Cheer Team Size	
8 <input type="checkbox"/> No Team <input type="checkbox"/> Competitive	Name: Phone: Email:	<input type="checkbox"/> Local Only <input type="checkbox"/> Regional <input type="checkbox"/> National	<input type="checkbox"/> Level 1 <input type="checkbox"/> Level 2	<input type="checkbox"/> Pom <input type="checkbox"/> Hip Hop <input type="checkbox"/> Step	<input type="checkbox"/> Small (5-18) <input type="checkbox"/> Large (19-36)
10 <input type="checkbox"/> No Team <input type="checkbox"/> Competitive	Name: Phone: Email:	<input type="checkbox"/> Local Only <input type="checkbox"/> Regional <input type="checkbox"/> National	<input type="checkbox"/> Level 1 <input type="checkbox"/> Level 2	<input type="checkbox"/> Pom <input type="checkbox"/> Hip Hop <input type="checkbox"/> Step	<input type="checkbox"/> Small (5-18) <input type="checkbox"/> Large (19-36)
12 <input type="checkbox"/> No Team <input type="checkbox"/> Competitive	Name: Phone: Email:	<input type="checkbox"/> Local Only <input type="checkbox"/> Regional <input type="checkbox"/> National	<input type="checkbox"/> Level 1 <input type="checkbox"/> Level 2 <input type="checkbox"/> Level 3	<input type="checkbox"/> Pom <input type="checkbox"/> Hip Hop <input type="checkbox"/> Step	<input type="checkbox"/> Small (5-18) <input type="checkbox"/> Large (19-36)
14 <input type="checkbox"/> No Team <input type="checkbox"/> Competitive	Name: Phone: Email:	<input type="checkbox"/> Local Only <input type="checkbox"/> Regional <input type="checkbox"/> National	<input type="checkbox"/> Level 1 <input type="checkbox"/> Level 2 <input type="checkbox"/> Level 3 <input type="checkbox"/> Level 4	<input type="checkbox"/> Pom <input type="checkbox"/> Hip Hop <input type="checkbox"/> Step	<input type="checkbox"/> Small (5-18) <input type="checkbox"/> Large (19-36)
18 <input type="checkbox"/> No Team <input type="checkbox"/> Competitive	Name: Phone: Email:	<input type="checkbox"/> Local Only <input type="checkbox"/> Regional <input type="checkbox"/> National	<input type="checkbox"/> Level 2 <input type="checkbox"/> Level 4	<input type="checkbox"/> Pom <input type="checkbox"/> Hip Hop <input type="checkbox"/> Step	<input type="checkbox"/> Small (5-18) <input type="checkbox"/> Large (19-36)
Inspirational <input type="checkbox"/> No Team <input type="checkbox"/> Exhibition	Name: Phone: Email:	<input type="checkbox"/> Local Only <input type="checkbox"/> Regional <input type="checkbox"/> National	<input type="checkbox"/> Level 1	<input type="checkbox"/> Pom <input type="checkbox"/> Hip Hop <input type="checkbox"/> Step	

APPROVED: Association Cheer Director:

Date:

APPROVED: Conference Cheer Director:

Date: