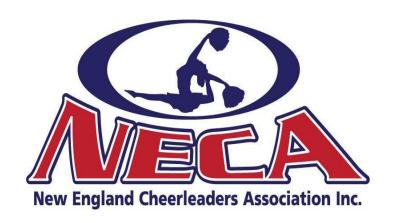
New England All Star & College Cheer & Dance Championship



REGISTRATION PACKET

March 28, 2020

The Ryan Center - Kingston, RI



REGISTRATION PACKET TERMS & CONDITIONS

REGISTRATION ASSISTANCE

We are here to help! If you have any questions regarding your registration or payments, please contact us at (860) 848-0040. For questions regarding any of the Rules & Regulations outlined for this event please contact us via e-mail so that we may take the time to evaluate your question and get you a quicker response. E-mail inquiries to Info@cheerNECA.com.

REGISTRATION FEE & CROSSOVER FEES

EARLY BIRD SPECIAL – You will receive the early bird special if you fill out your registration form and mail it in with a \$1000 NONREFUNDABLE deposit. **NO EXCEPTIONS**

Take advantage of our **EARLY REGISTRATION FEE** of only **\$79.00 per participant** if you **register AND pay \$1000 deposit before December 31, 2019**. Regular Registration fees after December 31st and before February 29th 2020 will be only **\$89.00** per participant. Late registrations after February 29th will be **\$99.00** per participant. Crossover fees are **\$35.00** per participant for each additional team. Crossover athletes pay the regular registration fee for the first team they compete on and then \$35 for each additional team they compete on. College Cheer & College Dance teams pay a flat fee of \$350.00 per team before December 31st or \$375 per team after December 31, 2019. Two (2) coaches per team will receive free admission and coaches' gift.

EVENT REGISTRATION OPTIONS

NECA has Mail in, Fax or E-mail Options Available. Please MAIL, FAX or E-MAIL the completed registration forms found in this packet. All payments must follow any faxed or emailed registrations. **We MUST HAVE a completed form and payment to officially register your program.** Payments are to be made to **NECA, Inc.** and should be included with your mailed registration. Please follow up with NECA at info@cheerNECA.com or (860) 848-0040 if you do not get confirmation that we have received your registration.

PAYMENT OPTIONS

Payments may be in the form of a business check, certified bank check, or money order. Payments made within 30 days of the event will require a certified bank check or official money order. There is a \$35.00 "check fee" for any returned checks. Gyms with outstanding fees will not be allowed to compete in the event. Please contact NECA at (860) 848-0040 with questions regarding payment. **All registration fees are NON-REFUNDABLE**. Exceptions are stated in our Refund Policy Below.

REFUND POLICY

No refunds will be issued within 30 days of the event for any reason to include injury and inclement weather. A refund of 75% of the total registration fee will be issued for any team withdrawing from the event at least 60 days prior to the event date. A refund of 50% of the total registration fee will be issued for any team withdrawing from the event within the 31-59-day window. A 100% TRANSFER of funds may be used for an NECA camp in the same calendar year as the event. Refunds/Transfers will not be issued for individual team members. Refund requests must be made IN WRITING to Info@CheerNECA.com and received by the deadlines above. All refunds will be issued back to the program in the manner of a business check.

DIVISION CHANGES

The deadline for requesting a division change is **March 10, 2020**. Changes to divisions must be submitted in writing by the person who filed the original registration. Changes to divisions after the March 10, 2020 deadline will require a \$250 change fee. We are not able to make changes to divisions once the final order has been posted.

NECA HOST HOTELS & TEAM PRICING: NECA has partnered with the hotels below to bring you TEAM PRICING. Please contact the hotels directly.

INFO COMING SOON...



REGISTRATION CHECKLIST

STEP 1	Please fill in all co	Program Information Intact information completely and CLEARLY . E-mail will be of correspondence for this event.
STEP 2		Team Registration ns and include team "nicknames" as you wish them to
STEP :		Payment Calculator our fees and include any additional coaches' bracelets.
STEP 4	Payments must acchecks, certified b	Payments & Owner Agreement company your registration. NECA accepts company bank checks, or money orders. Individual participant cepted. Gym owners must sign the registration policy and to
STEP :	Rosters MUST BE so Star rosters should	Team Rosters & Eligibility ubmitted with your registration for each competing team. All be printed directly from the USASF website. College and REC the enclosed roster form. Changes to rosters must be faxed to (860) 848-0040.
STEP (6 :	Submit Registration & Payments
	Mail to:	NECA Events P.O. Box 124 Uncasville, CT 06382
	Fax to:	(860) 848-0040
	E-mail Questions:	Info@cheerNECA.com



ALL STAR — COLLEGE — REC REGISTRATION FORM

STEP 1: PROGRAM REGISTRATION

Program Name:	Program Owner:						
Program Address (city, state, zip):							
Program Phone:		Program I	E-Mail:				
Contact Person:		Cell:		E-mail: _			
TEP 2: TEAM REGISTRATION							
Please list team names as you would like team is placed in the appropriate division						rately to e	ensure your
TEAM NAME (as it should appear)	SIZE	DIVISION	ALL-STAR/PREP /DANCE/REC??	LEVEL	PARTICIPANTS (total competing)	CROSS- OVERS	CROSSES TO (list all teams)
Ex. NECA All-Star "Magic"	LARGE	SENIOR CO-ED	ALL-STAR	5	22	3	SM/SR/5
Ex. NECA University		D III	College Co-Ed	(Int?)	27		
*** Please indicate here	-	• •			-	•	
should be considered for '		, <u>-</u>	•			nal cas	h prizes!
	Our Gym	wiii be in t	the running	101			

Top Large Gym (Division I) _____ (More than 125 All-Star and Prep Athletes Registered to All Gym Locations)

Top Small Gym (Division II) ______(125 or Less All-Star and Prep Athletes Registered to All Gym Locations)
* NUMBERS MUST INCLUDE TRADITIONAL FULL YEAR PARTICIPANTS ONLY. EXHIBITION, CROSSOVER, SPECIAL NEEDS AND DANCE DO NOT COUNT TOWARDS TOTAL *



ALL STAR — COLLEGE — REC REGISTRATION FORM

STEP 3: PAYMENT CALCULATOR

assert my compliance.

Signature of Gym Owner:

We request that all registration and payments be submitted ASAP to allow us sufficient time to process and release the order. Registrations may be accepted after this deadline on a first come first served basis with full payment.

TEAM PRICING (per participant)	EARLY RATE	REGULAR RATE	LATE RATE	
	(Before DEC 31, 2019)	(JAN 1 – FEB 29, 2020)	(after FEB 29, 2020)	
All Star Teams	\$79	\$89	\$99	
All Star Prep Teams	\$79	\$89	\$99	
Special Needs	FREE	FREE	FREE	
All Star Dance Teams	\$79	\$89	\$99	
Competitive Rec Teams	\$79	\$89	\$99	
College Cheer & Dance (PER TEAM)	\$350	\$375	\$375	
Crossovers	\$35	\$35	\$35	

COACH'S ADMISSION PACKAGE: Two (2) coaches per team will be allowed a complimentary official admission package. This includes a free coaches' gift and admission bracelet for the entire day. Each coach must be listed on your team roster and be an insured members of the gym/team they are accompanying. Additional coach's bracelets may be purchased in advance by the gym owner or person authorized to file the registration.

ALL COACHES MUST HAVE USASF GREEN LIGHT STATUS TO BE IN T	HE WARM UP AREA
ine ATOTAL Number of Participantsx \$(rate) \$79/\$89/\$99	=
x (rate) \$35.00	=
Line Cx (rate) \$18.00	=
Line D TOTAL Registration Cost – Add Lines A, B, and C together here use line D for college flat fee)	=
ine ETOTAL PAID TODAY	\$
(TOTAL DUE AFTER TODAY'S PAYMENT) (Line D – Line E) STEP 4: PAYMENT & OWNER AGREEMENT	=
GYM OWNER/COACH AGREEMENT: I have read the NECA Rules and Regulations for the terms and conditions outlined in the NECA rules & regulations, music licensing, and the agree to adhere to the terms and conditions set forth by NECA, Inc. Furthermore, I agree refundable registration costs as indicated. I am aware of the refund policies for this event	ne registration policies. I to pay the above semi-

Office Use Only Postmark Date: _____Payment Received: _____Rosters Received: _____Confirmation Sent: _____

Date: _____



COLLEGE – REC TEAM ROSTER & ELIGIBILITY SHEET

STEP 5: TEAM ROSTERS & ELIGIBILITY

GYM OWNER/COACH: USASF membership is required for all star athletes at this event. A USASF roster **MUST BE SUBMITTED** for every all- star team that is registered for the event. We ask you to please send in any updates to rosters at least 2 weeks prior to the event to allow for verification. All Star programs should use the roster generated by their USASF athlete membership. College and Recreational Teams may use this form. Please fill out the information completely and accurately. **Verification for all-star teams will be done through USASF membership database.**

Name of Team: _____ Division: ____ Level: _____

Coach 1:Coach 2:					
Participant's Name	D.O.B.	Age	Participant's Name	D.O.B.	Age
1.			18.		
2.			19.		
3.			20		
4.			21.		
5.			22.		
6.			23.		
7.			24.		
3.			25.		
9.			26.		
10.			27.		
11.			28.		
12.			29.		
13.			30.		
14.			31.		
15.			32.		
16.			33.		
17.			34.		
	ed here meet	the eligi	bility requirements of the division the	hat I have en	tered the

DATE: _____

GYM OWNER/COACH SIGNATURE:_____