



TEAM INFO	POLICY AGREEMENT
ORGANIZATION NAME _____	POLICY AGREEMENT MUST BE SIGNED BEFORE REGISTRATION WILL BE PROCESSED I, _____ have read SHOWTYME CHEER & DANCE'S rules and policies in their entirety. I understand I am financially responsible for the entire registration. I agree to abide by the rules and policies stated. If my telephone number is placed on the National Do Not Call Registry, I grant SHOWTYME CHEER & DANCE the permission to call me at the numbers listed on all forms. **
CONTACT PERSON _____	
EVENT(S) ATTENDING _____	
EVENT DATE _____	

Each team is responsible for a Team Registration Form. This form must include ALL needed information, which event you will be attending, and payment for this event.
By signing this form you are agreeing to ALL registrations fees. Showtyme Cheer & Dance is not responsible for any refunds.

SPECIALTY REGISTRATION ROSTER

The Rehearsal Lexington KY October 17, 2009	The Alabama Audition Huntsville AL November 15, 2009	The Memphis Matinee' Memphis TN December 6, 2009	The Cincinnati Curtain Call Cincinnati OH January 30, 2009	The Pittsburgh Preview Pittsburgh PA March 13, 2009
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#	Name of Participant(s)	Age	Grade	Division/Level
1	(Example) Johnson, Megan	17/16	12 11	Sr Hip Hop Solo
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FEE TABLE				PAYMENT PROCEDURES	
				() SEE RULES AND GUIDELINES	
	QUANTITY	PRICING		TOTAL	To pay by credit card , complete the "Credit Card Authorizatn"form and fax registration forms to (877) 230-7469. THE CREDIT CARD USED MUST BE IN THE NAME OF THE GYM, SCHOOL or CONTACT PERSON. NO EXCEPTIONS!! Only Certified Checks, Money Order or School Checks will be accepted as other forms of payment. Attach to all registration forms and mail to : SHOWTYME CHEER & DANCE , LLC 1890 STAR SHOOT PKWY SUITE 170-242 LEXINGTON, KY 40509 1-877-2:30-SHOW(7469)
Solo Routine		X	\$75	=	
Partner Stunt		X	\$100	=	
GRAND TOTAL				\$	