



STATE DANCE CHAMPIONSHIP TEAM REGISTRATION FORM

**ONE ENTRY FORM PER TEAM: DUPLICATE IF NEEDED
PLEASE PRINT AND MAIL**

SCHOOL: _____

SCHOOL ADDRESS: _____

SCHOOL PHONE: (____) _____ - _____

NUMBER OF COMPETITORS: _____

NUMBER OF ALTERNATES: _____

DIVISION: (MARK DESIRED DIVISION)

<input type="checkbox"/> VARSITY	<input type="checkbox"/> POM	<input type="checkbox"/> VARIETY
<input type="checkbox"/> JUNIOR VARSITY	<input type="checkbox"/> JAZZ	<input type="checkbox"/> HIGH KICK
<input type="checkbox"/> MIDDLE SCHOOL	<input type="checkbox"/> HIP HOP	<input type="checkbox"/> LYRICAL

HEAD COACH: *1. _____

ASST. COACH 2. _____

HOME PHONE: (____) _____ - _____ *CELL PHONE: (____) _____ - _____

HOME ADDRESS: _____

E-MAIL ADDRESS: _____

ATHLETIC DIRECTOR'S E-MAIL: _____

REGISTRATION FEES: CHECK ALL THAT APPLY

<input type="checkbox"/> MEMBER REGISTRATION FEE \$200 PER PERFORMANCE
<input type="checkbox"/> NON-MEMBER REGISTRATION FEE \$250 PER PERFORMANCE
<input type="checkbox"/> Bus Parking Fee \$20 per bus
<input type="checkbox"/> \$100 LATE FEE IF POST-DATED AFTER JANUARY 19 TH

TOTAL # OF TEAMS _____ TOTAL # OF BUSES _____

TOTAL FEES ENCLOSED: \$ _____ CHECKS MADE PAYABLE TO **NJCCA**

I certify that the students that are on my roster are currently enrolled in my school, a member of the schools dance team and that they are in good academic standing.

PRINCIPAL _____ COACH _____

I, _____ acknowledge the said rules and regulations governing the NJCDCA State Championship. Any infraction of said rules and regulations, including but not limited to, unsportsman-like conduct, will result in myself and the team being requested to leave the competition, thereby forfeiting our participation for the following year. I also forfeit any and all fees paid to the NJCDCA. I further understand ALL judging decisions are final. **DATE:** _____

Send all entries to:
NJCDCA STATE CHAMPIONSHIP
c/o Nikki Savino Mulcahy
16 Wadsworth Terrace
Cranford, NJ 07016

Registration Check List:	
<input type="checkbox"/>	Completed & Signed Registration form
<input type="checkbox"/>	Certificate of Insurance naming NJCDCA & Cure Insurance Arena
<input type="checkbox"/>	Official Roster of team (incl. alternates)
<input type="checkbox"/>	Individual Waivers (including alternates)
<input type="checkbox"/>	Music Copyright form
<input type="checkbox"/>	Registration Fee(s)(PAYABLE TO NJCCA)