

# Champion 2010

## Registration

Our confirmation information is sent via e-mail.  
Please make sure each coach's e-address is included in your registration.

~ Please use one form per Team/Camp ~

This will allow us to receive information on each coach for each level

### 2010 Champion Cheerleading Camp Fees

3-Day Classic Camp .....	Coach \$121 .....	Athlete \$266
2-Day Classic Camp .....	Coach \$81 .....	Athlete \$183
3-Day Beast Camp .....	Coach \$121 .....	Athlete \$277
4-Day Beast Camp .....	Coach \$147 .....	Athlete \$306
Coaches Camp .....		Coach \$118
One Day Stunt Camps .....	Coach FREE.....	Athlete \$59
Private Camps .....		Coach FREE..... Athlete \$136

School Name	Coach Name
Team Level	Phone Number <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell
Address	City State Zip
Email	

### Stunt Camp Please indicate camp choice, number on team and number of stunt groups.

Hartland - June 24    Grand Rapids Christian - August 16    Lake Orion - August 17

# of Youth (Grades 4-6) _____	# of Stunt Groups _____	# of JV _____	# of Stunt Groups _____
# of Junior High _____	# of Stunt Groups _____	# of Varsity _____	# of Stunt Groups _____
# of Freshman _____	# of Stunt Groups _____	# of Coaches _____	
Please enclose Registration Fee (Check, Money Order, VISA/MC) <b>One Day Camp • \$59 Per Athlete • Coaches Free</b>		<b>Total Fee Enclosed</b>	<b>\$</b>

### Coaches Camp Registration Form

Name	Email
Address	City State Zip
Phone Number <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	Phone Number <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell
School Name	
Level you are currently coaching	Number of years coaching
Please enclose <b>\$118 Registration Fee</b> (Check, Money Order, Visa, MC) - <b>Must be received by June 11, 2010</b> Confirmation letter and information will be sent via e-mail upon receipt of registration.	

Payment Information			
<input type="checkbox"/> Visa	<input type="checkbox"/> MC	Exp	Security Code
—	—	—	—
<b>Make Checks Payable to Champion Cheerleading</b>			

Registration Destination	
<b>Champion Cheerleading</b> 10067 Bergin Howell, MI 48843	<b>Phone: 810.632.9717</b> <b>Fax: 810.632.9799</b>
<b>Register online! <a href="http://www.championcheerleading.com">www.championcheerleading.com</a></b>	



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Private Camps .....		Coach FREE..... Athlete \$136

School Name	Coach Name			
Team Level	Phone Number	<input type="checkbox"/> Home	<input type="checkbox"/> Work	<input type="checkbox"/> Cell
Address	City	State	Zip	
Email				

### Classic Camp Registration Form *Please indicate session choice*

1st Choice		Dates		2nd Choice		Dates	
	# of Athletes		# of Coaches	If you are bringing male athletes or coaches, please indicate the number below:  _____		Please enclose deposit (check, money order, Visa/MC) <b>\$50 deposit per athlete and coach must be received in order to reserve your spot at camp. Balance due 14 days prior to your camp (or you will incur a \$200 late fee)</b>	
Grades 4-6							
Jr. High							
Freshman							
J.V.							
Varsity				<b>Total Fee Enclosed</b>		\$	

### Beast Camp Registration Form *Please indicate session choice*

1st Choice		Dates		2nd Choice		Dates	
# of Athletes		# of Males		# of Coaches		<b>Total Fee Enclosed</b>	
Please enclose deposit (check, money order, Visa/MC) <b>\$50 deposit per athlete and coach must be received in order to reserve your spot at camp. Balance due 14 days prior to your camp (or you will incur a \$200 late fee)</b>							

### Private Camp Registration Form *Please call office prior to filling out*

# of Athletes	If you do not have a minimum of 12 athletes, your fee is \$1632
Level: <input type="checkbox"/> Youth <input type="checkbox"/> Junior High <input type="checkbox"/> Freshman <input type="checkbox"/> Junior Varsity <input type="checkbox"/> Varsity	
Emphasis on:	<b>Total Fee Enclosed</b>
	\$

Payment Information			
<input type="checkbox"/> Visa	<input type="checkbox"/> MC	Exp	Security Code
—	—	—	—
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