

WVSSAC HIGH SCHOOL COMPETITIVE CHEERING ENTRY FORM

School _____ City _____
 Address _____ Zip Code _____ Region No. _____ Class _____
 School Colors _____ Team Nickname _____
 Coach's Name _____ Assistant Coach's Name _____

I certify that the following students are eligible under current eligibility rules of the WVSSAC to represent this high school in the regional competition.

NAMES OF CHEERLEADERS

	Last	First	Year in School
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____
13.	_____	_____	_____

ALTERNATES

1. _____
 2. _____

Date _____ Signed _____
Principal

Mail **this original** to the WVSSAC by 10/07/09

**CHECK ENTRY FORM CHECK LIST FOR POSTMARK DATE
WVSSAC, 2875 Staunton Turnpike, Parkersburg, WV 26104-7219**