



# 2017 NCA CHEER CAMP AT HUSSON REGISTRATION FORM

Date Rec'd _____
Amt. Rec'd _____

Complete one registration form per squad. Mail completed applications to: Tami Campbell, 31 Kennebec Road, Hampden, ME 04444

School/Squad/Gym Name: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

**SESSION CHOICE:**    \_\_\_ Session 1 - 7-10            \_\_\_ Session 2 – July 12-15            \_\_\_ Session 3 – July 17-20

**CAMP CHOICE:**            \_\_\_ NCA CAMP (Sessions 1,2,3)            \_\_\_ PERFORMANCE CAMP (Sessions 1,2,3)

**SQUAD TYPE:**    \_\_\_ Youth    \_\_\_ Jr. High    \_\_\_ JV    \_\_\_ Varsity    \_\_\_ All-Star    \_\_\_ Individual (session 2 only)

CAMP FEES : Resident (overnight)    \$315/camper\*    \$215/coach    (\*add \$10 if coming as individual)  
 Commuter (day camper)    \$290/camper\*    \$200/coach

PLEASE REGISTER \_\_\_\_\_ CAMPERS AND \_\_\_\_\_ COACHES FOR CAMP [ \_\_\_ females \_\_\_ males]. ENCLOSED IS PAYMENT OF \$ \_\_\_\_\_. Please make check payable to: Tami Campbell OR NCA Cheer Camp at Husson. You may send a \$50 deposit per person OR payment in full. Full payment is due 3 weeks prior to your camp session. An invoice and instructional letter will be sent to the contact person once your registration has been confirmed. An informational packet, health form and release form will be available through our website: [www.mainecheercamps.com](http://www.mainecheercamps.com).

Names of individuals attending are required. Remember to include adults/coaches. If necessary, please list additional names and corresponding information on a separate sheet of paper. This may be sent with final payment if necessary.

Name	Amt. Pd.	Coach	Camper	Resident	Commuter	Male	Female	Fall Grade	T-Shirt Size (YS-A XXL)
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\_\_\_\_\_ **Total Enclosed** (Please make ONE check payable to Tami Campbell or NCA Cheer Camp at Husson)

I have read and agree with the NCA Cheer Camp at Husson policies and procedures and will be responsible for communicating this information to parents/participants. Coach Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TO BE COMPLETED BY COACHES ONLY**  
 There will be \_\_\_ coaches attending as:  
 \_\_\_ resident \_\_\_ commuter  
 Payment: \_\_\_ \$50 deposit pp enclosed  
 \_\_\_ Free – bringing 20+ campers  
 \_\_\_ Free – this is my 6<sup>th</sup> + year  
 \_\_\_ Free – PIF when registering\*  
 \*See incentive list for date deadline & min. squad size

**PERSON TO WHOM CAMP INFORMATION SHOULD BE SENT:**  
 Contact Person: \_\_\_\_\_  
 Position (coach, student, parent): \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Contact Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_