

MCD Ultimate Productions Kalahari Resort - - Sandusky, OH
Open National REGISTRATION 2019

FEES AND DEADLINES

All dates are **postmarked**
 Fee is per Athlete and include
 Competition fee & medal

ADDED ATHELETES WILL NEED TO PAY THE CURRENT PRICE AT THE DATE THEY REGISTER—NO EXCEPTIONS—
*Will be returned if not postmarked by dead-line—and will need to pay the correct fee***

August 10th —Veteran teams that have competed with MCD in the past	\$35
Oct. 31st —Any Team that has competed in the past with us MCD—	\$45
Oct. 31st —FIRST YEAR COMPETING with MCD	\$50
Nov. 1st —Jan 10th	\$57
Jan 11th —Feb 24th	\$67
Late registration Feb 25th—March 4th *During late registration—Must call first to confirm and then You may send in registration *No registration taken at door *Registration closed March 7	\$76

Crossover—\$30-doesn't matter when you register

Specialty divisions—\$30 per person for each division—Must be registered for specialty before MARCH 4

Exhibition or Showcase Teams- \$25 (perform—get score sheets & Medals-but does NOT compete)

Jump Off—*NEW* Can register the day of the event \$15

SPECIAL NEEDS Team -NO FEE

PARENT TEAM—No Fee must still buy admission ticket

***NEW**MAILING ADDRESS**

MCD Ultimate Productions
 Christy Young
 PO BOX 61651
 Fort Myers, Florida 33906

TYPE OF PAYMENTS

Rec./All Star/studio/Individual

Certified Check or Money Order

Private / Public Schools

School Check Money Order

NO PURCHASE ORDERS

PAYMENTS MADE OUT TO

NEW MCD Ultimate Productions

NO REFUNDS

ONCE WE RECEIVE YOUR REGISTRATION—NO EXCEPTIONS & no transfers of monies to tickets-add athletes-Jump Etc.

MEDICAL RELEASE FORM

MUST BE MAILED—

DEADLINE MARCH 8 TH - \

Not Postmarked must be in our mailbox—Team will be disqualified & no refund if late

Coaches Code of Ethics

Team & Specialty Roster

Must be SENT WITH REGISTRATION or it will be sent back

T SHIRT

DEADLINE for team names March 4

Please Print and fill out completely
 REMEMBER!—This Registration Form and payment will NOT be accepted without the TEAM AND SPECIALTY DIVISION ROSTER AND Coaches Code of Ethics Form—sent with registration
***** If you register your team-you may send in Specialty / Tickets later if you wish *****

SCHOOL OR ORGANIZATION NAME _____

MAILING ADDRESS INCLUDING CITY AND STATE _____

REC AND ALL STAR—GYM / STUDIO OWNER _____

CONTACT PERSON FOR COMPETITIONS PHONE FOR CONTACT PERSON _____

EMAIL FOR CONTACT PERSON (IMPORTANT!) _____

HEAD COACH _____

LIST EACH COACH _____

ONLY 3 COACHES PER TEAM—ANY ADDITIONAL COACHES WILL NEED TO BUY A TICKET— ONLY COACHES LISTED ON REGISTRATION WILL BE LET IN EARLY WITH ATHLETES—

MASCOT AND OR COLORS _____

Total # of athletes on All Teams	_____	X	\$ _____	= _____
Total # of Crossovers or # of Exhibition / Showcase	_____	X	\$ 30.00	= _____
	_____	X	\$ 25.00	
Total # of each athletes in a Specialty Division	_____	X	\$ 30.00 or \$ _____	= _____
***REMEMBER to use your Specialty Division Roster sheet as a guide to calculate pricing ** Be sure to write name—division—& BDAY on Roster				
# of Adult Tickets Saturday	_____	X	\$ 15.00	= _____
-New pre order by FEB 13th - info on web- At the Door \$20				
# of Child/Senior Saturday	_____	X	\$ 8.00	= _____
Children ages 12 and under Seniors—ages 60 and older 3 years and younger FREE At the Door \$10				
-NEW pre order by FEB 13th— info on web-				
Coach Request for Copy of Roster, Registration , or Medical Release	_____	X	\$ 25.00	= _____
		<i>For each occurrence</i>	Administrative fee	
ANY Changes Roster Divisions/Levels (Feb 1st-March 10th) (No fee before Jan 31) Adding athletes does not apply—	_____	X	\$ 50.00	= _____
		<i># of changes</i>	Administrative fee	

TOTAL = _____

Coach POLICY AGREEMENT
 Must be signed before registration is processed

COACHES SIGNATURE
 I have read all MCD Registration Guidelines and Policies (on website) —I agree that I am financially responsible for securing payment for this entire registration (including any add ons) from my school or organization— I also agree to adhere to all rules