GEORGIA HIGH SCHOOL ASSOCIATION OFFICIAL CONTRACT FOR CHEERLEADING COMPETITIONS

INSTRUCTIONS: This form MUST BE TYPED. Host school completes top part except for competing school name. Host school completes the information in the box at bottom.	
This form must be submitted along with the Application for Sanction of Event Form to be placed on the GHSA	
website and used for schools to enter Sanctioned Cheerleading Events. Cheerleading competitions hosted by member schools must be held according to the National Federation of	
State High School Associations Spirit Rules and the GHSA Competitive Cheerleading Rules.	
H	ligh School of
(Competing High School)	(City)
	High School of <u>Richmond Hill</u>
(Hosting High School)	
for the cheerleading competition held on <u>October 3, 2015</u> (Month / Day / Year)	
	nament entry fee will be \$ <u>125.00</u> .
COMPETING TEAM INFORMATION:	AAAAA
Team Classification: JV 🗆 JV Coed 🗆 A 🗆 🗸	
Coach's Name:	
Coach's email:	
	Home Phone Number:
Cell Phone Number:	
I understand that the participants in this competition must be eligible under the rules and regulations of the latest edition of the Constitution and By-Laws of the Georgia High School Association. I understand that all fees are due by <u>August 5</u> , to the host school. I understand if a competition is cancelled, I will be notified by the host school by <u>August 10</u> , and my entry fee returned. I understand if I am unable to attend a competition due to an injury, I am allowed to schedule another competition after written notification to GHSA.	
Competing School's Signatures:	
Coach's Signature:	
School AD/Principal's Signature:	
Date:	
Send forms and make checks payable to:	
Host School /Checks Payable to: RHHS CBC	
Attention: Teresa Cowart	
Address: P.O. Box 2649	
City: Richmond Hill	State: <u>GA</u> Zip: <u>31324</u>
Tournament Director: Brittnee Coffman	
Email: bcoffman@bryan.k12.ga.us	
Phone Number: 912-459-5080	Fax Number: 912-756-5153