

2017 VARSITY SPIRIT SPECTACULAR PRE-PARADE PERFORMANCE

AT  Resort

REGISTRATION

Please complete this form and return with \$150.00 per person deposit to:
Varsity Spirit Spectacular • P.O. Box 660359 • Dallas, TX 75266.
To return by FedEx or UPS: 2010 Merritt Drive • Garland, TX 75041
or to fax along with credit card info: 972-840-4054

For any additional information regarding this tour,
please call 844-399-0644.
Make check payable to "Varsity Spirit Spectacular".
Deposit due: \$150.00 per person.

Participant name: _____

Full address: _____

Street Address (no P.O. Boxes accepted)

City

State

Zip

Home number: (____) _____ Cell number: (____) _____ Email address: _____

Check one: UCA Cheerleader UDA Dancer NCA Cheerleader NDA Dancer USA Cheer/Song/Dance/Drill

I attended 2017 Varsity Spirit camp at: _____

Name of University or Home Camp

Date Attended

Name of your school: _____ School address/city/state: _____

Parent Contact: _____ Email address: _____

Parent Contact: Work Phone: (____) _____ Home Phone: (____) _____ Cell Phone: (____) _____

Tour Chaperone: _____

* The majority of communication is via email. Include any additional email addresses that you would like to receive event information below. Please note that some school servers will not accept our email blast. To insure receipt please include a secondary email address if your primary is a school email address.

Additional email address:

TRAVEL INSURANCE: I PLAN TO: Purchase travel insurance via the internet (www.insuremytrip.com) Get my own travel insurance Not have any travel protection
EXTRA NIGHTS at \$242 per room per night _____ PARK HOPPER® Upgrades: 4 Day Park Hopper (\$35) _____ 5 Day Park Hopper (\$70) _____

If sending in registrations separately: Please list individually any attendees you would like to be roomed close to you:

MODE OF TRANSPORTATION TO ORLANDO, FL

Flying

Driving

PLEASE RE-READ THE PAYMENT SCHEDULE, CANCELLATION AND REFUND SECTIONS BEFORE SIGNING THIS CONTRACT.

I/WE HAVE READ THIS BROCHURE AND UNDERSTAND AND ACCEPT ITS CONTENTS:

Participant's Signature ____/____/____ (____) _____
Date Daytime Phone

Guardian/Parent Signature ____/____/____ (____) _____
Date Daytime Phone

For credit card payment call our office at 844-399-0644

CANCELLATIONS AND REFUNDS:

For cancellations received in the Varsity office on or **BEFORE** September 6, 2017, all monies will be refunded with the exception of the \$150.00 deposit. For cancellations in the Varsity office made **BETWEEN** September 7, 2017 and October 2, 2017, an additional \$100.00 per person penalty will apply to cover entertainment guarantees. For cancellations received **AFTER** October 2, 2017, **THERE WILL BE NO REFUNDS.**

ALL CANCELLATIONS MUST BE IN WRITING TO VARSITY. WE WILL NOT ACCEPT CANCELLATIONS BY PHONE. CANCELLATIONS MAY BE FAXED TO MICHELE SHETZER AT 972-840-4054.

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RULES OF CONDUCT AND BEHAVIOR

There will be many girls, boys, parents, and Varsity Spirit LLC staff traveling to Orlando as part of this event. We are looking forward to a great event, and would like to take this opportunity to assure all parents that our main concern is each participant's safety. Therefore, we have established the following rules of conduct and behavior for each participant while on tour. Each participant is representing their state, hometown, school, and most of all family and themselves.

Varsity Spirit LLC, asks each participant and their parents to carefully read and understand the necessity of following these rules. Parents and participants must both sign this form and return it (with registration and other attached forms) to the Varsity Spirit office. Please remember that we want you to have a great time, but within the parameters of this agreement.

1. A chaperone/adult (age 21 and over) is required to attend with participants. This chaperone will be responsible for participants outside of scheduled rehearsals and performances (free time) including but not limited to swimming, free time at event site or hotel.
2. Varsity Spirit LLC is not responsible for participants on their free time.
3. It is my responsibility to learn my routine from the video sent to me and to pack and bring all of my uniform to Orlando.
4. I understand that during the independent or free time on this tour, I will be able to sightsee or shop with my chaperone.
5. The use of alcohol and/or any other controlled substance is strictly PROHIBITED AND FORBIDDEN. No smoking is allowed. Failure to comply will result in immediate dismissal and a letter to your coach and principal.
6. I will be expected to be on time for all tours, sightseeing excursions, rehearsals, and performances.

I understand and agree that any infraction of these rules and conditions could cause my immediate expulsion from the tour and result in my being sent home at my parent's expense without refund for unused portions of the trip.

Participant's Signature

Date

Parent's Signature

Date

To be completed and returned for participants only.
RETURN TO: Varsity Spirit Spectacular
2010 Merritt Dr., Garland, TX 75041

**IF YOU FAIL TO COMPLETE ANY PART OF THIS FORM, IT WILL BE RETURNED TO YOU FOR COMPLETION,
PRIOR TO ACCEPTANCE.**

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ROOMING LIST

ROOMING LISTS (IMPORTANT: This form must be filled out completely in order for your registration to be accepted. Reservation will be entered according to the dates below and charged as such. List below names in full of people staying in each room. **Please Note: Rollaway beds are not available.**

(PLEASE PRINT OR TYPE)

Performer/Team Name _____

THE COACH / MAIN CONTACT RESPONSIBLE FOR FILLING OUT THIS ROOMING LIST FORM.

Please check the boxes which are applicable, letting Varsity know if you are a performer or spectator, male or female. You may have spectators and performers room together. If necessary, please make additional copies to accommodate large room needs.

- **Varsity is not responsible for the physical make-up of the rooming list. For team registration, all inquires from parents will be directed to the main contact.**
- **No performers allowed in single rooms.**
- **Package includes arrival November 30 and departure December 3rd. (Please note below early arrival or late departure.)**

P = Performer S = Spectator C = Coach/Advisor M = Male F = Female

ROOM 1	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

ROOM 5	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

ROOM 2	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

ROOM 6	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

ROOM 3	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

ROOM 7	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

ROOM 4	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

ROOM 8	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

Total Extra Room Nights (\$242) per group: _____

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AT Walt Disney World® Resort

Please complete this form and return to:
Varsity Spirit Spectacular
2010 Merritt Drive
Garland, TX 75041
(You may duplicate this form.)

UNIFORMS

FOR MEASURING TIPS PLEASE GO TO NCA.VARSITY.COM, NDA.VARSITY.COM, UCA.VARSITY.COM OR UDA.VARSITY.COM AND CLICK ON SPECIAL EVENTS.

It is very important that each participant measures correctly for these uniforms. Please watch the video instructions on our websites. Even if you already purchase Varsity Uniforms, every uniform style measures differently. Exchanges may not be available for this event. The uniform is made with MotionFLEX® material. This fabric fits tighter than traditional polyester uniforms. **We recommend if you measure in between sizes to go larger.**

School Team Name _____

City _____ State _____

DETERMINING YOUR UNIFORM SIZE

DO NOT TAKE YOUR OWN MEASUREMENTS!

When being measured, wear the same undergarments you normally wear under your uniform.

- **WAIST:** measure snugly around body at waistline.
- **BUST/CHEST:** With arms raised to shoulder level, measure around the fullest part of the chest.
- **HIPS:** Measure around the fullest part of the hips.

PARTICIPANTS UNIFORM SIZE(S):

Name	Age	Male or Female	Top Size	Pant/Skirt Size

FEMALE TOP SIZING CHART*

RECOMMENDED SIZE	BUST MEASUREMENT
XS	27" or below
S	28"-30"
M	31"-33"
L	34"-36"
XL	37"-39"
2XL	40"-42"
3XL	43"-45"

FEMALE SKIRT SIZING CHART*

SIZE	HIPS
2XS	31" or below
XS	32"-33"
S	34"-35"
M	36"-37"
L	38"-39"
XL	40"-41"
2XL	42"-43"
3XL	44"-45"

MALE TOP SIZING CHART

RECOMMENDED SIZE	CHEST MEASUREMENT
34	29"-30"
36	31"-32"
38	33"-34"
40	35"-36"
42	37"-38"
44	39"-40"
46	41"-42"
48	43"-44"
50	45"-46"
52	47"-48"

MALE PANT SIZING CHART

RECOMMENDED SIZE	WAIST	HIPS
S	28"-30"	34"-36"
M	31"-33"	37"-39"
L	34"-36"	40"-42"
XL	37"-39"	43"-45"

All male pants will be shipped unhemmed to ensure proper length

ADDRESS: For uniforms to be shipped via FedEx or UPS

Name: _____

Street Address (No P.O. Box numbers) _____

City _____ State _____ Zip _____ Phone # (____) _____

*Motionflex tops and skirts run smaller than polyester uniforms. If you are comparing to another Motionflex uniform that you have, note that parade uniforms will not be as tight as competition uniforms. Please select size based on the chart, and do not focus on other clothing or uniforms for sizing comparison.