



ICU UNIVERSITY WORLD CUP CHEERLEADING CHAMPIONSHIPS ELIGIBILITY FORM



Please complete the information below on EACH coach and participant attending the 2025 ICU World University Cup Cheerleading Championships, as well as your respective school information. This information must be completed and submitted to the link below by January 10, 2025. This information must be confirmed, authorized and approved by your institution's Registrar's Office for your team to compete. All team coaches, assistants, staff, medical advisors, federation officials, etc. must have current safeguarding approval in order to go into the warmup area, backstage or coaches' box and will be required to show ID upon registering at the event. In addition, each participating cheer team must have at least one Cheer Coach that has completed the safeguarding requirements in order to participate.

II. COACH ELIGIBILITY/MEMBERSHIP

1. All **USA** Coaches must be compliant with the 2025 College Cheerleading and Dance Team National Championships membership and eligibility requirements & guidelines (Note: If you have submitted your paperwork with UCA/UDA, you will NOT need to resubmit any additional paperwork with the ICU).
2. All **Non-USA** Coaches must be compliant with the University World Cup Championships eligibility requirements & guidelines as defined herein, including the ICU Safeguarding and background check policies found at www.cheerunion.org. Upon registration, ICU will follow up with all coaches and entourage members for safeguarding and background check processes required for the event.

Name of School/University/College: _____ **Division:** _____

Cheer Performance Cheer

COACHES' NAMES (Include Entourage, National Federation Officials, etc. anyone who is registered for the event and will accompany the team to the backstage/warm-up/athlete areas.

Coach Name: _____

Safeguarding Approval Date: _____

Coach Name: _____

Safeguarding Approval Date: _____

Coach Name: _____

Safeguarding Approval Date: _____

Coach Name: _____

Safeguarding Approval Date: _____

I certify that the participants listed below are current and eligible members of the above referenced team. I acknowledge that misrepresentation on this form could result in disqualification from the Championship. All of the cheer team members listed below abide by the ICU University World Cup Cheerleading Championship Safety Rules throughout the entire year/season.

Head Coaches' Name: _____

Date: _____

Head Coaches' Signature: _____

#	ATHLETE'S NAME	HOURS CURRENTLY ENROLLED IN	YEARS OF ELIGIBILITY COMPLETED	DATE OF BIRTH (MONTH/DAY/YEAR)
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23				
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#	ALTERNATE ATHLETE'S NAME	HOURS CURRENTLY ENROLLED IN	YEARS OF ELIGIBILITY COMPLETED	DATE OF BIRTH (MONTH/DAY/YEAR)
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I certify that all the above listed participants meet the eligibility requirements of _____ (College/University) to be a current and active member of the above listed team participating in the 2025 ICU World University Cup Cheerleading Championships, 17-19 January 2025.

MUST BE SIGNED BY THE COACH ABOVE, AS WELL AS SIGNED BY THE SCHOOL'S REGISTRAR'S OFFICE AND SCHOOL ADMINISTRATIVE SUPERVISOR.

REGISTRAR'S INFORMATION

Print Name: _____

Date: _____

Registrar's Signature: _____

ADMINISTRATIVE SUPERVISOR INFORMATION

Print Name: _____

Date: _____

Registrar's Signature: _____