

ICU WORLD SCHOOL CHEERLEADING CHAMPIONSHIPS ELIGIBILITY FORM



Please complete the information below on EACH coach and participant attending the 2025 ICU World School Cheerleading Championships, as well as your respective school information. This information must be completed and submittedthe ICU. 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., as well as your respective school information. 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 ELIGIBILTY/MEMBERSHIP

Head Coaches' Signature:

Name of School

- 1. All **USA** Coaches must be compliant with the 2025 NHSCC National High School Cheerleading Championship membership and eligibility requirements & guidelines.
- 2.All Non-USA Coaches must be compliant with the WSCC World School Cheerleading 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.

Division:

| COACHES' NAMES (Include Entourage, National Federegistered for the event and will accompany the tearess. | eration Officials, etc. anyone who is am to the backstage/warm-up/athlete |
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| 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 a referenced team. I acknowledge that misrepresentation disqualification from the Championship. All of the cheer team members listed & Cheerleading Championship Safety Rules throughout the cheer team of the cheer team members listed & Cheerleading Championship Safety Rules throughout the cheer team of the cheer team members listed & Cheerleading Championship Safety Rules throughout the cheer team of the cheer team members listed & Cheerleading Championship Safety Rules throughout the cheer team of the cheer team members listed & Cheerleading Championship Safety Rules throughout the cheer team members listed & Cheerleading Championship Safety Rules throughout the cheer team members listed & Cheerleading Championship Safety Rules throughout the cheer team members listed & Cheerleading Championship Safety Rules throughout the cheer team members listed & Cheerleading Championship Safety Rules throughout the cheer team members listed & Cheerleading Championship Safety Rules throughout the cheer team members listed & Cheerleading Championship Safety Rules throughout the cheer team members listed & Cheerleading Championship Safety Rules throughout the cheer team members listed & Cheerleading Cheer | pelow abide by the ICU World School the entire year/season. |
| Head Coaches' Name: | |
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| # | ATHLETE'S NAME | HOURS CURRENTLY ENROLLED IN | YEARS OF ELIGIBILITY COMPLETED | DATE OF BIRTH (MONTH/DAY/YEAR) |
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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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| team participating in the 2025 ICU World School Cheerleading Championships - 7 -9 February 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: | | Γ |)ate: | | | | |
| | gnature: | | | | | | |
| \DMINISTRAT | IVE SUPERVISOR INFORMATION | ON | | | | | |
| Print Name: | | | Date: | | | | |
| Registrar's Si | gnature: | | | | | | |