

INTERNATIONAL CHEER UNION (ICU)



ADAPTIVE ABILITIES

SPORT OF CHEER RULES

- CHEERLEADING-**
- PERFORMANCE CHEER-**

2025



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ICU PERFORMANCE CHEER RULES & GUIDELINES

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ICU ADAPTIVE ABILITIES - CHEERLEADING RULES

I. ICU ADAPTIVE ABILITIES CHEERLEADING DIVISIONS GENERAL RULES & CRITERIA

- A. All ICU general rules & guidelines (<https://cheerunion.org/education/rules-agegrid/>), mobility/support device rules, as well as routine requirements apply.
- B. Coaches must require proficiency before skill progression and must consider the athlete, group, and team skill levels with regard to proper performance level placement.
- C. All ICU Adaptive Abilities Unified Teams must be comprised of Athletes with and without a physical, sensory, or intellectual disability. *Note: For the ICU World Championships, ICU AA Unified Teams are required to be comprised of 25% or more athletes with a physical, sensory, or intellectual disability.*
- D. ICU Adaptive Abilities Traditional Teams must be comprised of 100% Athletes with a physical, sensory, or intellectual disability. *Note: ICU does not currently have a division for AA Traditional Teams.*
- E. As a potential condition for an athlete with an intellectual disability or neurological symptom, any athlete that may potentially have Atlanto-Axial Instability (AAI) or any physical condition associated with spinal cord compression are strictly prohibited from any skills that may pose a danger to an athlete with AAI or with any physical condition associated with spinal cord compression (including but not limited to forward rolls, backward rolls and any skill that may put an athlete with AAI or any spinal cord compression at risk, etc.). Written approval/clearance by a medical professional and proof of all waivers and documentation prior to physical activity is the direct responsibility of the Team Director and Coach.
- F. All athletes spotting, catching and/or cradling a skill must have mobility through their lower body (with or without use of mobility equipment) to absorb the impact of the skill, as well as with adequate lateral speed to spot, catch and/or cradle the skill.
- G. All athletes spotting, catching and/or cradling a skill must have at minimum 1 arm extended, not including a prosthetic or other device, beyond the elbow to adequately assist with the skill.
- H. Release moves and dismounts may be caught by individuals who were not the original base(s) if the main base(s) are not capable of catching and/or cradling the skill.
- I. Basket tosses are not allowed.

II. ICU ADAPTIVE ABILITIES CHEERLEADING DIVISIONS – BY LEVEL

With the enclosed Adaptive Abilities (AA) SPECIFIC DIVISION CRITERIA* in place, AA Cheerleading Divisions are available for the following levels (all rules by level can be found within the **ICU Rules Document** at <https://cheerunion.org/education/rules-agegrid/>):

**Clarification: Adaptive Abilities Athlete qualification is subject to respective ICU general rules and guidelines, as well as National Federation confirmation and/or medical documentation, as requested in compliance with the ICU Adaptive Abilities qualification guidelines.*

DIVISION LEVEL

- Introductory Level* (Level 0: non-building, non-tumbling)
- Beginner Level* (Level 0.5)
- Novice Level* (Level 1)
- Intermediate Level* (similar to Level 2)
- Median Level* (similar to Level 3)
- Advanced Level* (similar to Level 4)

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For any questions or requests for further clarification. Please email cheer.rules@cheerunion.org

III. GLOSSARY OF TERMS

For a full listing of the ICU Cheerleading Glossary of Terms (with video and visual examples as well), please see <https://cheerunion.org/cheerleadingglossary/>. For any questions or requests for further clarification. Please email cheer.rules@cheerunion.org

IV. CHEERLEADING MOBILITY & SUPPORT DEVICE RULES

Note: The use of the term "wheelchair" below also applies to the use of scooters and similar mobility devices, as is applicable.

- A. All mobility equipment, prosthesis, and braces are considered part of the athlete unless they are removed, in which case they are considered legal props, until replaced on or returned to the athlete.
- B. Wheelchair users when basing stunts and pyramids must have all wheels in contact with the performance surface during the skill with an added and appropriate anti-tip attachment (or a spotter/bracer with both feet firmly placed on the performance surface with both hands gripped on the 2 back handles stabilizing the wheelchair with both wheels on the performance surface) for safety.
Clarification: For a wheelchair anti-tip attachment to be appropriate, it must be in contact with the chair and the performance surface as an additional point of contact to the performance surface while both wheels of the wheelchair are also in contact with the performance surface.
- C. Mobility devices (i.e., wheelchairs, crutches, etc.) may be used to aid the top person in loading into a stunt and/or pyramid. Example: A top person may step upon any portion of a wheelchair, mobile device, and/or upon a base supporting a crutch to load into a skill.
- D. Wheelchair users when topping stunts and pyramids in the wheelchair (or similar apparatus) must use a seatbelt.
- E. All athletes spotting, catching and/or cradling a skill have mobility through their lower body (with or without use of mobility equipment) to absorb the impact of the skill, as well as with adequate lateral speed to spot, catch and/or cradle the skill.
- F. All athletes spotting, catching and/or cradling a skill must have at minimum 1 arm extended, not including a prosthetic or other device, beyond the elbow to adequately assist with the skill.
- G. Release moves and dismounts may be caught by individuals who were not the original base(s) if the main base(s) are not capable of catching and/or cradling the skill.

V. ADAPTIVE ABILITIES ATHLETE QUALIFICATION GUIDELINES

For the purpose to assist and encourage ICU's National Federations to develop Adaptive Abilities opportunities for disabled and nondisabled athletes (e.g. "Adaptive Abilities Unified" divisions) within our Sport, enclosed (as a guideline only) please find a the IPC's brief description of the 10 eligible* impairment types (below) also shown on the IPC website: <https://www.paralympic.org/classification> found under section 2 chapter 3.13 of the IPC Handbook.

Note 1: Due to the newness of the ICU Adaptive Abilities development programme at the grass-roots level, the ICU encourages its National Federations to use the IPC's excellent brief description of eligible impairment types simply as a guideline – and to encourage participation of all disabled athletes who may or may not meet the impairments listed below. **NEW in 2024: ICU asks all Adaptive Abilities teams make its best effort to include a team composition with, at minimum, one (1) or more athlete(s) with an IPC eligible impairment type with Minimum Impairment Criteria (MIC) as noted on www.cheerunion.org. This is only a guideline & recommendation for 2024. Please email info@cheerunion.org with any questions.*

***Note 2: Based on the uniqueness of Cheerleading competition, the ICU additionally includes Hearing Impairment (#11) as a guideline only and for possible future development of programmes compliant with the ICSD. The ICU again encourages National Federations to be inclusive of athletes of all disabilities, who may or may not meet the impairments listed below, for Adaptive Abilities development purposes.*

IPC's brief description of the 10 eligible* impairment types (as a guideline for ICU Adaptive Abilities Divisions):

Impairment: Explanation

1. **Impaired muscle power:** Reduced force generated by muscles or muscle groups, such as muscles of one limb or the lower half of the body, as caused, for example, by spinal cord injuries, spina bifida or polio.
2. **Impaired passive range of movement:** Range of movement in one or more joints is reduced permanently, for example due to arthrogryposis. Hypermobility of joints, joint instability, and acute conditions, such as arthritis, are not considered eligible impairments.
3. **Limb deficiency:** Total or partial absence of bones or joints as a consequence of trauma (e.g., car accident), illness (e.g., bone cancer) or congenital limb deficiency (e.g., dysmelia).
4. **Leg length difference:** Bone shortening in one leg due to congenital deficiency or trauma.
5. **Short stature:** Reduced standing height due to abnormal dimensions of bones of upper and lower limbs or trunk, for example due to achondroplasia or growth hormone dysfunction.
6. **Hypertonia:** Abnormal increase in muscle tension and a reduced ability of a muscle to stretch, due to a neurological condition, such as cerebral palsy, brain injury or multiple sclerosis.

7. **Ataxia:** Lack of co-ordination of muscle movements due to a neurological condition, such as cerebral palsy, brain injury or multiple sclerosis.
8. **Athetosis:** Generally characterised by unbalanced, involuntary movements and a difficulty in maintaining a symmetrical posture, due to a neurological condition, such as cerebral palsy, brain injury or multiple sclerosis.
9. **Visual impairment:** Vision is impacted by either an impairment of the eye structure, optical nerves or optical pathways, or the visual cortex.
10. **Intellectual Impairment:** A limitation in intellectual functioning and adaptive behaviour as expressed in conceptual, social, and practical adaptive skills, which originates before the age of 18.
****Hearing Impairment:** Hearing is impacted by either an impairment of the ear structure, illness, or other factors leading to a hearing loss of at least 5 decibels in an athlete's "better ear"- that is not corrected with the use of hearing aids, cochlear implants and/or similar devices.

VI. SCORESHEETS

To access the ICU Adaptive Abilities Scoresheets, please reference <https://cheerunion.org/education/scoresheets/>. For any questions or requests for further clarification. Please email cheer.rules@cheerunion.org

VII. AGE GRID & ATHLETE ELIGIBILITY RECOMMENDATIONS

The ICU recommends that all teams consult the specific event athlete age & eligibility requirements where the respective team may compete, as this criterium can differ for different events. For ICU's recommended Age Grid criteria, please reference <https://cheerunion.org/education/rules-agegrid/>.

VIII. OTHER CRITERIA (PERFORMANCE SURFACE DIMENSIONS, ROUTINE TIME, ETC.)

The ICU recommends that all teams consult the specific event criteria (performance surface dimensions, routine time, etc.) where the respective team may compete, as this criterium can differ for different events. For ICU's criteria for ICU events, please reference <https://cheerunion.org/championships/>.

IX. OTHER COMPETITION FORMATS

- A. **GAME DAY** is a Cheer competition format that breaks down the elements of Game Cheering into individual segments (in a competitive format, with a pause between each segment) reflective of Game Cheering commonly performed by Cheer Teams at sporting events. All general Safety Rules and applicable level rules apply with added restrictions. Please see <https://cheerunion.org/education/gameday/> for more information.
- B. **STUNT** is a Cheer competition formats Cheer skills into an exciting head-to-head game / competition between two teams who execute skills-based routines in various categories – partner stunts, jumps & tumbling, pyramids & tosses, and team routines. All general Safety Rules and applicable level rules apply. Please see <https://stuntthesport.org/> for more information.
- C. **URBAN CHEER** is a high energy, rhythmic style of Cheer within the positive traditions in the Urban style. All general Safety Rules and applicable level rules apply.

ICU ADAPTIVE ABILITIES - PERFORMANCE CHEER RULES

I. ICU ADAPTIVE ABILITIES PERFORMANCE CHEER DIVISIONS

GENERAL RULES & CRITERIA

- A. All ICU Performance Cheer general rules & guidelines <https://cheerunion.org/education/rules-agegrid/>), mobiles/support devices rules, performance cheer prop rules, as well choreography, costuming, and routine requirements apply.
- B. All ICU Adaptive Abilities Unified Teams must be comprised of Athletes with and without a physical, sensory, or intellectual disability. *Note: For the ICU World Championships, ICU AA Unified Teams are required to be comprised of 25% or more athletes with a physical, sensory, or intellectual disability.*
- C. ICU Adaptive Abilities Traditional Teams must be comprised of 100% Athletes with a physical, sensory, or intellectual disability. *Note: ICU does not currently have a division for AA Traditional Teams.*
- D. As a potential condition for an athlete with an intellectual disability or neurological symptom, any athlete that may potentially have Atlanto-Axial Instability (AAI) or any physical condition associated with spinal cord compression are strictly prohibited from any skills that may pose a danger to an athlete with AAI or with any physical condition associated with spinal cord compression (including but not limited to forward rolls, backward rolls and any skill that may put an athlete with AAI or any spinal cord compression at risk, etc.). Written approval/clearance by a medical professional and proof of all waivers and documentation prior to physical activity is the direct responsibility of the Team Director and Coach.
- E. The use of Service Animals by athletes is permitted (not allowed in the ICU general rules & guidelines).
- F. All ICU Adaptive Abilities Unified National Teams must be comprised of a minimum 25% or more athletes with a disability per team.
- G. Depending on the global interest. ICU reserves the right to include ICU Adaptive Abilities Unified Divisions specifically for athletes with Visual Impairments and Hearing Impairments.
- H. Qualification of athletes with disabilities for Adaptive Abilities Divisions specifically, is subject to respective ICU general rules and guidelines, as well as National Federation confirmation and/or medical documentation, as requested. Please see ICU Adaptive Abilities qualification guidelines for more information.

II. ICU ADAPTIVE ABILITIES PERFORMANCE CHEER DIVISIONS - BY GENRE & LEVEL

With the enclosed Adaptive Abilities (AA) SPECIFIC DIVISION CRITERIA* in place, AA Performance Cheer Divisions are available for the following Genres & Levels (all Rules by Genre & Level can be found within the **ICU Rules Document** at <https://cheerunion.org/education/rules-agegrid/>):

**Clarification: Adaptive Abilities Athlete qualification is subject to respective ICU general rules and guidelines, as well as National Federation confirmation and/or medical documentation, as requested in compliance with the ICU Adaptive Abilities qualification guidelines.*

DIVISION GENRE & LEVEL

- POM: Novice Level*
- POM: Premier Level*
- HIP HOP: Novice Level*
- HIP HOP: Premier Level*
- JAZZ: Novice Level*
- JAZZ: Premier Level*
- HIGH KICK: Novice Level*
- HIGH KICK: Premier Level*

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III. CATEGORY / GENRE DEFINITIONS

POM: Incorporates the use of proper Pom motion technique that is sharp, clean, and precise while allowing for the use of concepts from Jazz, Hip Hop and High Kick. An emphasis is placed on group execution including synchronization, uniformity and spacing. The choreography of a dynamic and effective routine focuses on musicality, staging of visual effects through fluid and creative transitions, levels, and groups, along with complexity of movement and skills. Poms are required to be used throughout the routine. The uniform/costuming should reflect the category style. See score sheet for more information.

HIP HOP: Incorporates authentic street style influenced movements with groove and style. An emphasis is placed on group execution including synchronization, uniformity and spacing. The choreography of a dynamic and effective routine utilizes musicality, staging, complexity of movement and athleticism. Distinctive clothing and accessories reflecting the Hip Hop Culture must be worn. See score sheet for more information.

JAZZ: Incorporates traditional or stylized dynamic movements with strength, continuity, presence, and proper technical execution. An emphasis is placed on group execution including synchronization, uniformity, and spacing. The choreography of a dynamic and effective routine utilizes musicality, staging, complexity of movement and skills. The overall impression of the routine should be lively, energetic, and motivating, with the understanding that the dynamics of movement may change to utilize musicality. The uniform/costuming should reflect the category style. See score sheet for more information.

HIGH KICK (KICK): Incorporates the use of proper high kick technique that includes flexibility, endurance, stamina, upper and lower body strength, placement, and control, while allowing for the use of creative concepts such as staging and skills. High Kicks are required to be used throughout the routine in a purposeful manner and should be the emphasis of routine content. The choreography of a dynamic and effective high kick routine focuses on musicality, staging of visual effects through intervals in kick lines, fluid and creative transitions, levels and groups, along with complexity of movement and athleticism. An emphasis is placed on group execution including synchronization, uniformity, and spacing. The uniform/costuming should reflect the category style. See score sheet for more information.

IV. GLOSSARY OF TERMS

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V. PERFORMANCE CHEER MOBILITY & SUPPORT DEVICE RULES

Note: The use of the term "wheelchair" below also applies to the use of scooters and similar mobility devices as is applicable

- A. All mobility equipment, prosthesis, and braces are considered part of the athlete unless they are removed and used to enhance the visual aspect of the performance, in which case they are considered props – and this is not allowed. *However, if any device is removed based on the need for an athlete to perform a skill and the device itself is not used as a prop for the purpose to enhance the visual aspect of the performance, then the device is not considered a prop and is allowed.*
- B. Mobility devices (i.e., wheelchairs, crutches, etc.) are allowed within the rules of the division and may be used to support the athlete during the execution of skills.
- C. It is the responsibility of the Coach to assure that there are no rocks or other sharp objects lodged in the wheels of the mobility device that could damage the performance surface - prior to the performance.
- D. Wheelchair users when basing lifts must have all wheels in contact with the performance surface during the skill with an added and appropriate anti-tip attachment (or a spotter/bracer with both feet firmly placed on the performance surface with both hands gripped on the 2 back handles stabilizing the wheelchair with both wheels on the performance surface) for safety. *Clarification For a wheelchair anti-tip attachment to be appropriate, it must be in contact with the chair and the performance surface as an additional point of contact to the performance surface while both wheels of the wheelchair are also in contact with the performance surface.*
- E. Performing athletes using a wheelchair (or similar apparatus) in the lift must use a seatbelt.

- F. All athletes spotting, catching and/or cradling a skill must have mobility through their lower body (with or without use of mobility equipment) to absorb the impact of the skill, as well as with adequate lateral speed to spot, catch and/or cradle the skill.
- G. All athletes spotting, catching and/or cradling a skill must have at minimum 1 arm extended, not including a prosthetic or other device, beyond the elbow to adequately assist with the skill.

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3. **Limb deficiency:** Total or partial absence of bones or joints as a consequence of trauma (e.g., car accident), illness (e.g., bone cancer) or congenital limb deficiency (e.g., dysmelia).
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10. **Intellectual Impairment:** A limitation in intellectual functioning and adaptive behaviour as expressed in conceptual, social, and practical adaptive skills, which originates before the age of 18.

****Hearing Impairment:** Hearing is impacted by either an impairment of the ear structure, illness, or other factors leading to a hearing loss of at least 55 decibels in an athlete's "better ear" - that is not corrected with the use of hearing aids, cochlear implants and/or similar devices.

VII. SCORESHEETS

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VIII. AGE GRID & ATHLETE ELIGIBILITY RECOMMENDATIONS

The ICU recommends that all teams consult the specific event athlete age & eligibility requirements where the respective team may compete, as this criterium can differ for different events. For ICU's recommended Age Grid criteria, please reference <https://cheerunion.org/education/rules-agegrid/>.

IX. OTHER CRITERIA (PERFORMANCE SURFACE DIMENSIONS, ROUTINE TIME, ETC.)

The ICU recommends that all teams consult the specific event criteria (performance surface dimensions, routine time, etc.) where the respective team may compete, as this criterium can differ for different events. For ICU's criteria for ICU events, please reference <https://cheerunion.org/championships/>.

X. OTHER COMPETITION FORMATS - GAME DAY

GAME DAY is a competition format that breaks down the elements of Game Cheering into individual segments (in a competitive format, with a pause between each segment) reflective of Game Cheering commonly performed by Performance Cheer Teams at sporting events. All general Safety Rules and applicable level rules apply with added restrictions. Please see <https://cheerunion.org/education/gameday/> for more information.