

REQUIRED * REQUIRED * REQUIRED * REQUIRED * REQUIRED * REQUIRED * REQUIRED

AMERICAN CHEER POWER

ATHLETE CROSSOVER FORM

PROGRAM NAME: _____ **EVENT ATTENDING:** _____

**Use This Form To Detail Your Crossovers:
INCLUDE TEAM NAME, AGE DIVISION & LEVEL**

	From Team	To Team	Number of Crossovers
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			

Total Number of Crossovers

ATTENTION COACHES:

Athlete Crossover Form is due 2 weeks prior to the event in order to be eligible for the athlete crossover discount (if applicable). You may submit this form to our office or assign crossovers through your Varsity Portal (Online Registration).

*ALL STAR PROGRAMS ONLY