



Spirit Series Host Application

HOST INFORMATION

Name: _____
 Home Address: _____
 City: _____ State: _____ Zip: _____
 Contact Phone: _____ Email: _____

FACILITY INFORMATION

Name of Facility: _____ Facility Contact: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 School/Facility Phone: _____ School/Facility Fax: _____

Tell us about your experience

Have you hosted a cheerleading competition before?

Yes No

If YES, what company did you host a competition for and when? _____

Is your organization a/an

High School or Middle School squad Recreation Organization
 All Star squad Other

Are you a coach or advisor at the school/organization? Yes No

Why do you want to host an AmeriCheer/AmeriDance/Eastern competition?

Tell us about your facility

Please give a brief description of the relationship with your school/organization and the facility. Have you worked together in the past? What types of events are held at the facility?

Will you rent the facility or incur added facility expenses for the competition? Yes No

If YES, please explain what costs your group will incur (facility rental fees, chair rental, sound system, janitor, etc.)

Is your facility:

Indoor Outdoor (most common in warm climate regions) Combination of both

Please explain: _____

What is the seating capacity of your gymnasium? _____

Tell us about your equipment

I will have access to (**without** renting) for the performance area:

Cheer Foam Floor (42'x42') Cheer Foam Floor (54'x42')

I will have access to cheer foam mats or wrestling mats for the warm-up area floor (at least 42'X42'): Yes No

If Yes, what type: _____

Do you plan to **rent** a floor system for this competition? Yes No

If so, please explain: _____

Please describe the sound system in as much detail as possible:

Please list three dates that would work with your school/organization and facility schedule: October; November (excluding Thanksgiving weekend); December (excluding Christmas Eve and Christmas Day); January (New Years Even and New Years Day); February

First Choice: _____ **Second Choice:** _____ **Third Choice:** _____

Signature _____ Date _____

Please send application to:
 AmeriCheer, AmeriDance, Eastern attn: Event Department
 20 Collegeview Rd., Westerville, OH 43081
 Fax 614.898.0404