

# GOV. THOMAS JOHNSON PATRIOTS



## 2ND ANNUAL WINTER CHEER EXPLOSION

Thomas Johnson High will be hosting its 2<sup>nd</sup> Annual Winter Cheer Explosion This competition is open to JV and Varsity Teams  
Thursday, January 17, 2019  
Competition start time 7:00p.m.

### REGISTRATION:

- \$150.00 for 1 team; \$250.00 for 2 teams
- Make checks payable to TJHS Boosters
- All registration forms and checks are due by January 2, 2018
- PAYMENTS ARE NON REFUNDABLE
- First 20 teams registered will be guaranteed a spot
- Registration begins at 5:30pm, doors will open at 6:30pm for spectators, and the competition starts promptly at 7:00p.m.
- Dinner will be provided for coaches

### COMPETITION GUIDELINES:

- National Federation of High Schools (NFHS) and MPSSC Cheerleading rules and regulations will be followed including:
  - NO CELL PHONES are allowed in the cheerleaders holding area
  - Athletes must wear their entire uniform for the duration of the competition/no jewelry
- Safety and panel judges are certified by MPSSC
- The length of the routine must be no longer than 2 minutes and 30 seconds
- Up to 30 people may enter the competition (ex. 28 squad members, 2 coaches)

### EVENT INFORMATION:

- Athletes will compete on a 42'X42' non spring cheerleading mat
- Concessions and event T-Shirts will be sold, NO OUTSIDE food will be permitted
- Hospitality room will be open for all coaches & judges, coaches gifts, specialty awards
- Award Trophies to 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> place JV teams, Trophies to 1<sup>st</sup> thru 5<sup>th</sup> place Varsity teams,
- Cost of Admission \$5.00

Please complete your registration and mail it with your check made payable to TJHS Boosters to:

Thomas Johnson High School c/o Lesley Goines  
1501 North Market Street, Frederick MD 21701

# Registration Form

School Name:		
School Mascot:		
School Colors:		
Division: <small>(Circle One or Both.)</small>	JV	Varsity
School Address:		
School Phone #:		
# of Athlete's Competing:		
Varsity Coach Name:		
Cell # & Email:		
Assistant Coach Name:		
JV Coach Name:		
Cell # & Email :		
Assistant Coach Name:		

\*Only coaches listed on this registration form will be permitted to enter with the team!

\*Please list squad members alphabetically - ONE name per line.

\*Please label all alternates, Mascots, and managers - alternates MUST be in uniform.

\*Everyone listed on this sheet will be allowed in during registration time.

\*All others will be directed to the entrance.

**Please make sure all information is filled out completely. Any questions, please contact Lesley Goines at (301) 693-7442 or [Lesley.Goines@fcps.org](mailto:Lesley.Goines@fcps.org) or Monique Bryan at (240) 590-9030 or [Nique7123@gmail.com](mailto:Nique7123@gmail.com)**

## JV

## Varsity

Student Athlete's Name	Student Athlete's Name
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.
11.	11.
12.	12.
13.	13.
14.	14.
15.	15.
16.	16.
17.	17.
18.	18.
19.	19.
20.	20.
21.	21.
22.	22.
23.	23.
24.	24.
25.	25.
26.	26.
27.	27.
28.	28.
29.	29.
30.	30.

(Please list names alphabetically; indicate your managers & alternates)

