



Whitman's Annual  
C O M P E T I T I O N

Walt Whitman High School is hosting its 3rd annual varsity cheerleading competition. Please join us as we prepare our teams for the regional and state cheerleading competitions. This competition is open to Varsity teams and is sanctioned by the Maryland Public Schools State Cheerleading Committee (MPSSCC).

**WHEN:** October 21st, 2017.

**WHERE:** Walt Whitman High School, Bethesda, MD 20817.

**WHO:** High School Varsity Teams.

**COST:** \$150 - Please Register by October 1st.

- Checks payable to Walt Whitman Athletics

## Competition Information

1) **GENERAL INFORMATION:** The competition is open to the first 20 Varsity teams on a first-come first-serve basis, whose completed entry form and NON-REFUNDABLE fee arrive by the specified deadline until all spaces are filled.

- National Federation of High Schools (NFHS) and MPSSCC 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.
- Judges will be provided by MPSSCC and will use MPSSCC score sheets.
- The length of the routine shall not exceed two and a half minutes.
- Up to 2 coaches may accompany each team.

2) **EVENT INFORMATION:** Once we have received all teams entry forms and fee, we will send a floor plan and warm-up/performance time to each team.

- The competition will be held in the main gymnasium of Walt Whitman High School.
- Routines will be performed on 7 panels of cheerleading mats.
- Team registration will begin at 8:30AM for teams.
- Warm-ups will begin promptly at 9:00 am. (warm-up times that are missed are not guaranteed to be made up due to scheduling of the event.)
- Teams will have 5 minutes to warm up, warm-ups will be on a full 7 panel wrestling mat.
- Tumblers will have an additional 5 min to warm up on 2 panels.
- Hospitality Room will be provided for the 2 registered coaches, with light refreshments and beverages.
- Doors will open to the public at 11:00 am. The competition will begin at 11:30 am. Admission for spectators: \$5.00.
- Concessions and t-shirts will be sold.

3) **Please make checks payable to Walt Whitman Athletics and mail or email your information to:**

**Walt Whitman HS, Attn: Kristi McAleese  
7100 Whittier Blvd.  
Bethesda MD 20817**

**or**

**[kristi.mcaleese@mcpsmd.net](mailto:kristi.mcaleese@mcpsmd.net)**

4) Music needs to be put on an iPhone or MP3 Player. Please make sure your device plays correctly, our system is wireless. WWHS is not responsible for music mishaps. Coaches will be responsible for playing their own music during the competition performance. During warm-ups coaches will have the opportunity to check their music with our system. .

5) The time limit for ALL performances is 2:30 minutes. Time begins with the first intended movement, to words, or music and ends with the final motion or stunt.

6) A team may be disqualified if its sponsors, members or fans display unsportsmanlike conduct at the competition. (See MPSSCC sportsmanship guidelines)

7) Announcement of awards will take place shortly after the last performance in each division. Divisions will be announced once the teams have registered. Placement for the top 3 teams will be awarded.

If you have any questions, please contact Kristi McAleese at  
kristi.mcaleese@mcpsmd.net

## WWHS CHEER COMPETITION ENTRY FORM

Please PRINT neatly or TYPE (especially names of coaches & members).

School Name \_\_\_\_\_

Number of Female Cheerleaders \_\_\_\_\_

Number of Male Cheerleaders \_\_\_\_\_

Number of Sponsors/Coaches \_\_\_\_\_ limit 2

Sponsor/Coach Name(s) E-mail address AND phone number

1) \_\_\_\_\_

\_\_\_\_\_

2) \_\_\_\_\_  
\_\_\_\_\_

Squad Member Names

_____	_____
_____	_____
_____	_____
_____	_____
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_____	_____

I have read and understand the Competition Information for the Walt Whitman Cheer Competition. My NON-REFUNDABLE entry fee of \$150.00 is enclosed.

\_\_\_\_\_  
Signature of the Sponsor/Coach

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of the Athletic Director

\_\_\_\_\_  
Date

Squad Biography: Please complete the enclosed form about your team that will be read prior to your performance.

# 2017 Team Bio

School: \_\_\_\_\_

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