



ACA Nationals

Team Change/Cancellation Form

Deadline for changes – December 15

Team changes will no longer be accepted via phone, fax or email. Division changes, cancellations in teams or participants must be made on this form and faxed to 972-669-0369 by December 15. All Team additions must be received by mail with additional registration fee included by December 15. NO EXCEPTIONS.

Gym/Team/School _____ Date _____

Contact Person _____ Cell Phone _____ Email _____

Circle Event: HS Sm Gym All Star Circle Change: Division Change # of Participants Team Cancellation

DIVISION CHANGE

<u>Original Division</u>	<u>Team Name</u>	<u>Change to which Division?</u>

CHANGE NUMBER OF PARTICIPANTS ON A TEAM

<u>Division</u>	<u>Team Name</u>	<u>Original # on Team</u>	<u>Circle One</u>		<u>Number change</u>			<u>New Team #</u>
			+	-		=		
			+	-		=		
			+	-		=		

For teams with **additional** participants: Additional registration \$ must be included with Change Form and received by Dec. 15

Total Number of participants added _____ X Original Registration Fee \$ _____ = \$ _____ enclosed

For teams with **less** participants: For cancelling participants on a team that is still competing. A per person cancellation fee will be charged.

Total number of participants cancelling _____ X Original Registration Fee \$ _____ Refund Due = \$ _____

TEAM CANCELLATION A per person cancellation fee will be charged. Cancellation fee varies for event.

<u>Division</u>	<u>Team Name</u>	<u>Registration Fee paid per participant</u>	<u># on Team</u>
		\$ _____	
		\$ _____	