

College Advisor/Coach/Director: Please fill out one Team Tracking form for each College team that you are bringing to the event. This form should be turned in with all of the Agreement of Compliance forms during check-in at the event.

Name of School/ Organization _____

Contact's First Name _____ Last Name _____

Contact's Address _____

City _____ State _____ Zip _____

School Phone (_____) _____ Home Phone (_____) _____

Cell Phone (_____) _____ Email Address _____

Mark the category which best describes your squad/team:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Cheer Division IA | <input type="checkbox"/> Cheer Small Coed | <input type="checkbox"/> Cheer Jr. College | <input type="checkbox"/> Dance Division IA |
| <input type="checkbox"/> Cheer Div. I | <input type="checkbox"/> Cheer All-Girl Div. I | <input type="checkbox"/> Intermediate All-Girl | <input type="checkbox"/> Dance Division I |
| <input type="checkbox"/> Cheer Div. II | <input type="checkbox"/> Cheer All-Girl Div. II | <input type="checkbox"/> Intermediate Coed | <input type="checkbox"/> Dance Division II |

Level of Team ability / skill level: Elite Advanced Intermediate

Number of squad/team members attending this camp _____ Total number on squad/team _____

Participant Award Tracking

Please print the name of each squad/team member attending this event. Place mascot at the bottom. Staff will circle AA for All-American.

1. _____	AA	13. _____	AA
2. _____	AA	14. _____	AA
3. _____	AA	15. _____	AA
4. _____	AA	16. _____	AA
5. _____	AA	17. _____	AA
6. _____	AA	18. _____	AA
7. _____	AA	19. _____	AA
8. _____	AA	20. _____	AA
9. _____	AA	21. _____	AA
10. _____	AA	22. _____	AA
11. _____	AA	23. _____	AA
12. _____	AA	Mascot _____	AA

For Office Use Only:

Cheer Dance

Camp Name _____

Camp Dates: _____ - _____

Head Instructor _____

Buddy Instructor _____

Cheer:

- | | |
|--|--|
| <input type="checkbox"/> Most Collegiate | <input type="checkbox"/> Spirit Award |
| <input type="checkbox"/> Most Improved | <input type="checkbox"/> Best All-Around |
| <input type="checkbox"/> Game Day Finals – Place _____ | |
| <input type="checkbox"/> Rally Routine – Place _____ | |
| <input type="checkbox"/> Bronze Bid | |
| <input type="checkbox"/> Silver Bid | |
| <input type="checkbox"/> Gold Bid | |

Dance:

- | | |
|--|--|
| <input type="checkbox"/> Most Collegiate | <input type="checkbox"/> Most Spirited |
| <input type="checkbox"/> Most Improved | <input type="checkbox"/> Best All-Around |
| <input type="checkbox"/> Best Team Dance – Place _____ | |
| <input type="checkbox"/> Bronze Bid | |
| <input type="checkbox"/> Silver Bid | |
| <input type="checkbox"/> Gold Bid | |

Did Advisor/Director listed above complete the certification program. ___Y ___N

Cheer Dance

1. Did this squad/team attend an **NCA/NDA** camp last summer? Yes (if Yes, please skip to #4) No
2. If not, which organization's camp did the squad/team attend? Please mark all that apply:
 COA UCA UDA USA Other _____
3. Why did you choose to attend the above camp last summer? Please mark all that apply:
 Camp Date Qualify for Nationals Program/Organization Other _____
 Price Camp Location Staff Company Sales Representative
4. Why did you choose to attend this **NCA or NDA** camp this summer? Please mark all that apply:
 Camp Date Qualify for Nationals NCA/NDA Program/Organization NDA Master Instructor
 Price Camp Location NCA/NDA Staff Other _____
5. Which of the following influenced your camp decision most? Please mark all that apply:
 Brochure Uniform Sales Rep Another Coach/Director NCA/NDA Employee Internet
 Call from the Corporate Office Other _____

If you are attending a **Private Camp**, please answer questions 6 and 7.

6. Why did you choose a private camp?
 Price Choice of Date Convenience Individual Instruction Other _____
7. Will you choose a private camp again? Yes No If yes, an NCA/NDA Private? Yes No
8. How many years have you been coaching? _____? Mark all that apply: Cheerleaders Dancers
9. Would you like information on our National Coaches/Directors Conference in the spring next year? Yes No
10. Have you been certified by AACCA within the past 4 years? Yes No
11. Would you like more information on the American Association of Cheerleading Coaches and Administrators (AACCA) certification? Yes No
12. Does your squad/team compete? Yes No
If yes, at which level? Local State Regional National
13. Do you plan to attend **NCA/NDA** Collegiate Nationals this year? Yes No

THANK YOU FOR YOUR TIME AND FOR ATTENDING NCA/NDA!

--OVER--