



XTREME SPIRIT TEAM ROSTER FORM

MAIL TO ● 461 PARK AVE. STE. 100, LAKE VILLA IL 60046 FAX TO ● 888-ROAD-2-WORLDS (888-762-3296)
 SCAN & EMAIL TO ● REGISTER@XTREMESPIRIT.COM

Team Name (Gym/Org/School): _____ Secondary Name (ex. Rockets, Inspire, Orange): _____

Age Division/Level: _____ Contact Name _____ Contact Text Alerts: _____ - _____ - _____

Events Attending: _____ Event Dates: _____

Team Roster				
Team Member Full Name	Jacket Size (YS, YM, YL, AS, AM, AL, AXL, A2XL)	"X" if Crossover	List Age Divisions/Levels Crossing To	List Age Divisions/Levels Crossing From
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36				

Dance Teams May Use Multiple Forms When Over 36 Athletes

Total Waivers Required _____

of Participation Trophies Required _____