St. Rita HS Cheerleading Tryout
2019 Permission/Release Form

This form must be turned in at the beginning of tryouts on March 30, 2019.
NO ONE will be allowed to tryout without this form filled out and signed by the appropriate people.

Candidate for: ☐ **All Teams** ☐ Jr Varsity Team **Only**
☐ Varsity Team **Only**

Please PRINT all information as you wish it to appear on all communication documents.

Name: _____

Address: _____ **City:** _____ **Zip:** _____

Cell Phone ( ) _____ **Home Phone: ( )**_____ **Date of Birth:** __/__/__

Candidate's Email Address: _____

High School in 2019 – 2020_____

Grade in 2019 - 20 (circle): Frosh Soph Junior Senior **Grade School Attended:** _____

Candidate Agreement: I, _____, have read all responsibilities that govern the St. Rita HS Cheerleading program. I further understand that my attendance at practices, games, special events, fundraisers, cheer camps, competitions, choreography, and tumbling camp are of utmost importance. Thus, work and all other activities and/or sports come AFTER cheerleading. I further understand that Skills Camp (mid-June) & Choreography camp (mid-late July) are mandatory events and I will be in attendance. I will not question or dispute the final decisions made by the Coaches, regarding my placement in the program.

I have read these responsibilities and understand that failure to abide by them will result in my removal from the team.

Candidate's signature: _____ **Date:** _____

Mother (Guardian) Name: _____ **Father (Guardian) Name:** _____

Parent Email Address: _____

Parent Cell Phone ( ) _____ **Home: ( )** _____

Parent / Guardian Agreement: I, _____, have read and fully understand the responsibilities that will govern my daughter if she is chosen to represent St. Rita HS as a cheerleader. I further understand that my daughter's attendance at all practices, games, special events, fundraisers, cheer camps, competitions, choreography, and tumbling camp are of utmost importance. Thus, work and all other activities and/or sports come AFTER cheerleading. I understand that summer Skills Camp (mid-June) and Choreography Camp (mid-late July) are mandatory events and my daughter will be in attendance at these events. I agree to pay all expenses on time, participate in all fundraisers, volunteer my time at selected fundraising events and provide transportation for my daughter to and from events. To the best of my knowledge, my daughter has no pre-existing medical issues that limit her full participation in the program.

I, _____, will not question or dispute the final decisions made by the Coaches regarding my daughter's placement in the program. I hereby give my consent for my daughter (listed above) to try out for the St. Rita HS Cheerleading team(s) and recognize both her and my responsibilities.

Parent / Guardian signature: _____ **Date:** _____