

Tivy High School Cheerleading Tryouts

Parent Permission Form

_____ has my permission to tryout for cheerleader at Tivy High School. I agree to meet the required financial obligations and to participate in all cheerleader fundraisers and other activities to the best of my ability.

Parent/Guardian Signature

Date

CELL NUMBER OR EMERGENCY NUMBER: _____

Candidate Agreement

I _____, recognize that being a cheerleader at Tivy High School is a significant commitment, and I agree to meet all required cheerleading responsibilities if I am selected. I understand that being a cheerleader means I am a representative of Tivy High School through my actions while at school, in the community and through social media. I also understand that my academic performance is directly related to my eligibility to cheer. Being a cheerleader means that I am a role model. If I am elected, I will strive to do my very best to represent my cheer team and my school.

Furthermore, I do hereby agree to not learn any of the tryout material before the tryout clinic starts. Learning any material before the tryout clinic will result in automatic dismissal from tryouts.

Candidate Signature

Date