



Tryout Form

Please return the tryout form along with your tryout fee of \$25.
Print this form and staple your check/cash to the form.

STUDENTS

NAME _____

Age _____ Birth Date _____ Age on May 31, 2008 _____

Address _____

City, State _____ ZIP _____

Home Phone _____ Cell Phone _____

Cheerleading
Experience: _____

Tumbling Ability (with out spot): _____

Parent's Names _____

Parent's email
address _____

Parents Signature _____ Date _____