

**WALTON MIDDLE SCHOOL
CHEERLEADER APPLICATION**

FOR MRS. BROWN'S USE ONLY
TRYOUT FEE: _____
PHYSICAL EXP.: _____

THIS AND ANY OTHER FORMS MUST BE TURNED IN TO
MRS. BROWN or MRS. THORNTON NO LATER THAN FRIDAY, APRIL 21ST

Contact Info:

Student Name: _____

Current Grade: _____ Current School: _____

Cell Phone Number: _____

Parent/Guardian: _____

Mailing Address: _____

Home Phone: _____ Cell: _____

Work: _____ Other: _____

Parent's E-Mail: _____

Teacher Recommendations:

Signature of Teacher: _____ Date: _____

Subject Area: _____ Comment: _____

Signature of Teacher: _____ Date: _____

Subject Area: _____ Comment: _____

You **must** turn in a copy of your current physical with these forms and \$10.00 non-refundable tryout fee to participate in clinic and tryouts

Acknowledgement of Rules, Obligations, and Procedures **Oath of Walton Middle School Cheerleader Applicant**

I will govern myself as an outstanding representative of my school at all times, and I will follow all of the guidelines of the above organization. I further understand that if I am selected I will be required to attend ALL practices and perform at ALL home football games and at girls' and boys' home basketball games for the season. I understand a note will be required to excuse **any** absence. I agree that if chosen I will maintain the required grade point average, attendance requirements and behavioral expectations. Appropriate changes will be made if deemed necessary by the sponsor/coach or school administration.

I understand what is required of me as a potential Walton Middle School Cheerleader. I realize that if I do not fulfill these expectations, I may not be allowed to tryout, or I may be removed from the squad after being selected. An office referral will result in removal from the squad.

Student's Name: _____

Student's Signature: _____

Parent/Guardian Permission Form

I have read the above oath and understand all of the qualifications, general requirements, and obligations of cheerleading squad members. I understand what will be required of my child as a Walton Middle School cheerleader. I realize that if my child does not fulfill these expectations, my child may not be allowed to tryout or may be removed from the squad after being selected.

I give my consent for _____ to tryout for the position of cheerleader. If the above applicant is chosen as a member of the cheerleading squad, he/she also has my permission to participate in all of the required activities of the aforementioned organization.

I understand that I am responsible for payment of tryout fee, camp, uniform rental fees, accessories, and supplies. If for any reason my child is unable to perform his or her duties as a cheerleader, all fees paid will not be refunded.

Parent's Name: _____

Parent's Signature: _____