

**MCHS Sideline Cheer Team Tryout Application 2024-2025**  
**APPLICATIONS DUE NO LATER THAN WEDNESDAY,**  
**MARCH 27TH BY 4:00PM IN ATHLETICS OFFICE to TRYOUT**

*PLEASE WRITE IN PEN!!*

Full Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Student grade as of *Fall 2024*, please circle:

9th            10th            11th            12th

Current Address: \_\_\_\_\_

\_\_\_\_\_

Student Mobile Phone Number: \_\_\_\_\_

\_\_\_\_\_

Student Email Address: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Mobile Number: \_\_\_\_\_

Parent/Guardian Email Address: \_\_\_\_\_

Previous School Attended: Mt. Carmel or Other (please list): \_\_\_\_\_

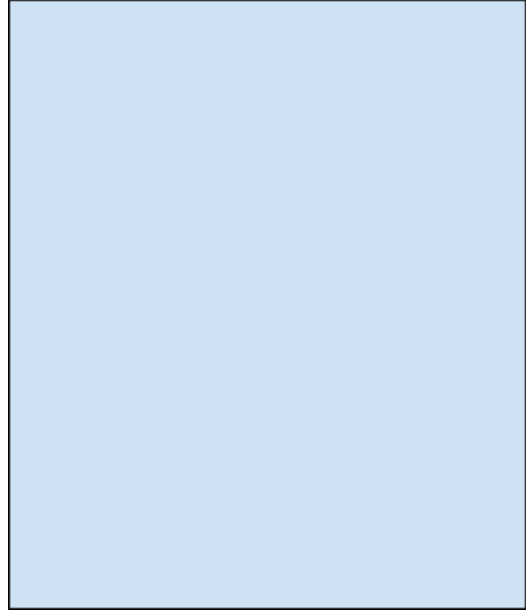
Current GPA: \_\_\_\_\_ (Must have a 2.0 gpa on April progress reports

AND maintain a 2.5 gpa for season). Please attach *Fall* and *Winter* Academic Report

Cards, AND *Spring* progress (screenshot).

Please choose which team you are trying out for (circle one or both):

**JV** and / or **V**



Tumbling Skills (circle all that apply):

*Standing:*

back-handspring

back-tuck

multiple back-handsprings

back-handspring to tuck

*Running Passes:*

roundoff back-handspring (1)

roundoff back-handsprings (2+)

roundoff back-handspring(s) to...

tuck

lay-out

full

Why do you want to be a *Sundevil Cheerleader*?

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*Cheer* experience:

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Other *extra-curricular activities* you expect to be involved with *at Mt. Carmel*:

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This application will **NOT** be considered unless the following items are attached:

1. **Photo** of self on front
2. Copies of **report cards** for **first** and **second trimester, current proof of grade**
3. One **letter of recommendation** (from previous coach, teacher, staff or community figure)

**All Inter/Intra District transfers must be approved prior to tryouts!**

## 2024 / 2025 Cheer Acceptance/Permission Agreement

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My child, \_\_\_\_\_ has my permission to tryout to be a member of the cheer squad at Mt Carmel High School. Upon making the squad, I understand that he/she must abide by the rules and regulations set forth by the Cheer Coach and Administration, and that he/she will be present for all required events, including, but not limited to all practices, games and events. I will be provided with a copy of the MCHS Cheer Squad Rules and Regulations and I understand that the violation of any of the rules may lead to temporary or permanent suspension from the squad. I agree to complete and return the attached forms no later than **Wednesday March 27th, 2024 by 4:00pm**, or my child will not be allowed to try out for the squad. I understand that my child must attend all clinic sessions (unless excused by the advisor or administrator) and tryout or my child may not be considered for a position on the 2024-2025 cheer squad.

I understand that my daughter/son will be evaluated by qualified judges and we agree to abide by the decision of the judges.

I understand that cheerleading carries with it an inherent risk of physical bodily injury, including but not limited to: muscle pulls, dislocation, concussion, and broken bones. I understand this risk and will not hold Mt. Carmel High School, its personnel, or coaching staff responsible in the case of accident or injury at any time. Any physical limitations must be noted in the Tryout Application and modifications will be provided as necessary.

Parent/Guardian Name \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

I am interested in being a Cheer Squad Member at Mt. Carmel High School. I understand the risks stated above. If selected, I promise to abide by the rules and regulations set forth by the Head Cheer Coach and the Athletic Director and/or Principal of Mt. Carmel High School. I promise to cooperate and follow the instructions of the squad's coach.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19**

**ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT**

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In consideration of being allowed to participate on behalf of (insert name of sports organization) athletic program and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and...
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASES or others, and assume full responsibility for my participation; and...
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and...
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin HEREBY RELEASE AND HOLD HARMLESS (*sideline cheerleading*) their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASES OR OTHERWISE, to the fullest extent permitted by law.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

Name of participant \_\_\_\_\_ Date \_\_\_\_\_

Participant signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF  
REGISTRATION)**

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This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releases and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releases for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Parent/Guardian Name \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_