

2019-2020 JMA Cheerleading Tryout Application

Name: _____

Birth Date: _____

Address: _____

Phone: _____

Grade *Next* Year (number): _____

Email Address: _____

Please initial next to which team or position you are trying out for. If you are interested in trying out for **BOTH** the Spirit and Competition programs, please initial **BOTH**. It is perfectly acceptable to not do both.

Please initial the option below that applies to you:

JM _____ I am trying out for Spirit Cheerleading.

JM _____ I am trying out for Competition Cheerleading.

Please rank the below positions in which you are MOST confident:

(1 being most confident, 4 being least confident)

_____ flyer _____ back spot _____ main base _____ secondary base

Tentative Tryout Schedule

Wednesday 5/8

3:30-3:45- Brief Meeting and Overview of Tryouts

3:45-4:30- Spirit Practice

4:30-5:00- Competition Practice

Thursday 5/9

3:30-3:45- Roll out Mats/Stretch

3:45-4:20- Spirit Practice

4:20-4:30- divide into tryout groups

(Spirit dismissed after this session)

4:30-5:00- Competition Practice

Friday 5/10

3:30-5 Tryout in groups

***Tryout material can be found online at dstephens4jma.weebly.com

JMA Tryout Checklist

JM _____ I am a full time student at John Milledge Academy.

JM _____ I have included with this application proof of a recent physical that is within 1 calendar year of the tryout date.

JM _____ I have included with this application a photo copy of BOTH sides of my medical insurance card.

JM _____ Application Information Sheet

JM _____ JMA Cheer Covenant

Applicant's Signature _____

Applicant's Parent Signature _____

Date _____