



# ATHLETE TRYOUT & EVALUATION INFORMATION

ATHLETE NAME _____	NEW ATHLETE _____	RETURNER (2021-2022 SEASON) _____
CHEER AGE (AGE AS OF 12/31/2022)	WHAT LEVEL ARE YOU TRYING OUT FOR? (L1, L2, L3, L4, L5, L6)	CURRENT EVAL GROUP(S) & LEVEL(S)
DOB (MM/DD/YYYY)		
<p>I would like to be considered as a crossover (two teams)?    Yes            No            Negotiable</p> <p>Circle Current Stunt Position (Circle All that Apply)            FLYER            BASE            BACKSPOT            NOT SURE</p> <p>My child _____ WILL or _____ WILL NOT participate in post season events.</p> <p><b><u>Returners Only (Check One)</u></b></p> <p>I would like to stay on my current level / evaluation group _____</p> <p>I would like to tryout to be considered for a Higher-Level Team _____</p> <p style="text-align: center;">Level 1    Level 2    Level 3    Level 4    Level 5    Level 6(Worlds)</p> <p>I would like to be placed in an ADDITIONAL Eval Group to be considered as a Stunter _____</p> <p style="text-align: center;">Level 1    Level 2    Level 3    Level 4    Level 5    Level 6(Worlds)</p> <p style="text-align: center;">Parent/Legal Guardian Signature _____ Date: _____</p>		