



This checklist will assist you in what paperwork must be submitted in order to tryout for UWA Cheerleading.

UWA Cheerleading Application \_\_\_\_\_

Application Questions \_\_\_\_\_

Consent Waiver to Participate \_\_\_\_\_

Proof of Acceptance \_\_\_\_\_

Statement Form \_\_\_\_\_

Walk-On Position Sheet \_\_\_\_\_

Please take a picture of the following items and attach to your email along with your completed packet to cheer@uwa.edu. The subject line should say UWA Cheerleading Tryouts- First and Last Name. If you are unable to provide this by the date above please contact Donald Smith.

**Upon receiving your application, the Coaching Staff will contact you to confirm and send further information.**



**APPLICATION**

**NAME:** \_\_\_\_\_  
FIRST MIDDLE LAST

**DOB:** \_\_\_\_\_ **AGE:** \_\_\_\_\_  
MM/DD/YY

**EMAIL:** \_\_\_\_\_

**HOME ADDRESS:** \_\_\_\_\_

\_\_\_\_\_  
CITY STATE ZIP CODE

**CELL PHONE #:** \_\_\_\_\_

**PARENT OR GUARDIAN INFORMATION**

**NAMES(S):** \_\_\_\_\_

**HOME ADDRESS:** \_\_\_\_\_

\_\_\_\_\_  
CITY STATE ZIP CODE

**PHONE #:** \_\_\_\_\_ **CELL PHONE #:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_



**ACADEMIC INFORMATION**

CURRENT SCHOOL \_\_\_\_\_ GPA \_\_\_\_\_

PROBABLE/CURRENT MAJOR: \_\_\_\_\_

CLASSIFICATION FOR FALL 2020:  FRESHMAN  SOPHOMORE  JUNIOR  SENIOR

ANTICIPATED GRADUATION YEAR: \_\_\_\_\_  
(Month/Year)

UWA STUDENT ID: \_\_\_\_\_  
(ONLY if you are a current UWA student)

**LIST HIGH SCHOOL HONORS, CLUBS, ACTIVITIES (attach separate sheet if necessary)**

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**LIST COLLEGE HONORS, CLUBS, ACTIVITIES (attach separate sheet if necessary)**

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## EXPERIENCE INFORMATION

**STUNTING POSITIONS:** *circle all stunting positions you have experience and put a check next to where you have the most experience.*

FLYER

MAIN

SIDE

BACK

**What experience do you have with cheerleading/ gymnastics? (Please list all previous and current experience including choreography, positions held on past squads, all tumbling, and stunting skills you have mastered, etc). Attach a separate sheet if necessary.**

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## Application Questions

1. What motivated you to tryout for the West Alabama Cheerleading Team?

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2. If you make the squad, how do you plan on managing your time and balancing your academic, athletic, and personal commitments?

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3. What can you bring to the University of West Alabama Cheerleading program?

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4. What does commitment mean to you?

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List any medical conditions we should be aware of:

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DO YOU HAVE ANY CURRENT COMMITMENTS (JOBS, SCHOOL, WEDDINGS, COMPETITIONS, ETC.)

THAT WILL CONFLICT? \*dates will be reviewed\*

YES

NO

PLEASE LIST CONFLICTS BELOW:

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## TEAM STATEMENT FORM

Tryout Candidate Name:

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Please initial by each statement indicating you have read and will abide by the following.

\_\_\_\_\_ (Initial) I understand that being a University of West Alabama cheerleader is a time commitment, and if selected, I will be expected to attend all practices, performances, and special events year round.

\_\_\_\_\_ (Initial) I will **NOT** make any pre travel plans prior to the final schedule being given out for each semester.

\_\_\_\_\_ (Initial) I understand there is an academic, appearance, performance, and conduct expectation for the West Alabama Cheerleaders. I understand that failure to meet any of these may result in being held from performances or dismissed from the team.

\_\_\_\_\_ (Initial) I understand every game/performance is a privilege. Being withheld from a performance opportunity is at the discretion of the West Alabama Coach and Staff. My attendance, skills, attitude, and academics will be some factors used to determine this privilege.

\_\_\_\_\_ (Initial) I understand that West Alabama Cheerleading offers a scholarship of \$1500 per year.

\_\_\_\_\_ (Initial) I understand that travel to and from Livingston, AL over the summer and any other school breaks is the sole responsibility of me, the cheerleader.

**\*SUMMER SCHEDULE WILL BE FINALIZED AND PRESENTED AT TRYOUTS.**

TRYOUT CANDIDATE SIGNATURE

\_\_\_\_\_ DATE \_\_\_\_\_

PARENT/GUARDIAN (IF UNDER 18 YEARS OLD)

\_\_\_\_\_ DATE \_\_\_\_\_



## WALK-ON POSITION SHEET

**Walk-ons:** A walk-on position is a cheerleader who shows potential but needs to work on a few skills to make a scholarship spot. This person will still cheer at all home games, away games, and receive all amenities the squad receives.

- Walk-ons are members of the team and will be expected to attend all practices and workouts
- Walk-ons will receive a more detailed outline of responsibilities and expectations at the first team meeting.

WOULD YOU ACCEPT A WALK-ON POSITION?

YES

NO

TRYOUT CANDIDATE SIGNATURE

\_\_\_\_\_ DATE \_\_\_\_\_

PARENT/GUARDIAN (IF UNDER 18 YEARS OLD)

\_\_\_\_\_ DATE \_\_\_\_\_





- **LIABILITY WAIVER, RELEASE AND INDEMNIFICATION AGREEMENT/ COVENANT NOT TO SUE/ CONSENT TO MEDICAL TREATMENT/MEDIA RELEASE**
- **Read this document completely before signing. Its effect is to release the University of West Alabama, its employees, students, governing board, and the State of Alabama from any liability resulting from participation in the cheerleading activities described below, and to waive all claims for damages or losses against the University which may arise from such activities.**
- **PARTICIPANT'S FULL NAME:** \_\_\_\_\_
- **DATE OF BIRTH (MM/DD/YYYY):** \_\_\_\_\_
- In consideration of me or my son/daughter/ward (hereinafter referred to as "Participant") being allowed to participate in cheerleading activities and its affiliated activities, which may include, but are not limited to, cheering, stunts, tumbling, running, jumping, spotting other participants, and other activities associated with cheerleading, wellness and fitness activities (hereinafter referred to as "Program"), I, exercising my own free choice, hereby RELEASE, RELIEVE, WAIVE, DISCHARGE, INDEMNIFY, HOLD HARMLESS AND COVENANT NOT TO SUE The University of West Alabama, its members, board of trustees, officers, servants, agents, employees, and any other persons or entities acting on their behalf and the successors and assigns of any and all of the aforementioned persons and entities (hereinafter referred to as "University" or "Releasee") from any and all liability, claims, demands, damages, and causes of action whatsoever, whether known or unknown in the past, present or future, either in law or equity, relating to injury, disability, death, or other harm to person or property or both arising out of Participant's participation in and/or presence at the Program.
- To the best of my knowledge, Participant is in good physical condition, and I am not aware of any physical infirmity, which would place Participant at risk to participate in any way in the Program's activities. I acknowledge that I am fully aware of the risks and hazards that maybe associated with this Program, including the risks of bodily injury, death, or damage to property that may occur from known or unknown causes, and I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISK OF LOSS, PROPERTY DAMAGE, OR PERSONAL INJURY, INCLUDING DEATH, that may be sustained by Participant, or any loss or damage to property owned by me/Participant, as a result of being engaged in the Program's activities, that may occur from known or unknown causes.
- I understand, accept, and assume all such hazards and risks, and waive all claims against the University and other persons as set forth herein. I understand that I am solely responsible for any costs arising out of any bodily injury or property damage sustained through my and/or Participant's participation in all acts associated with the above-identified Program. It is my intent by the execution of this Release to fully bind Participant, myself, my parents, spouse, heirs, legal representatives, and assigns to all of the provisions of this Release.
- I expressly acknowledge by my execution of this Release that it is my intent that this Release is to be construed to be as broad and inclusive as permitted by the laws of the State of Alabama and that, if any portion is held to be invalid, it is agreed that the balance shall continue in full force and effect. I understand and agree that the execution of this Release and my voluntary consent to be bound by the terms and conditions set out herein are a material consideration for the University offering and allowing my participation in the Program, and that but for the execution of this Release no such Program would be available to me. I acknowledge the receipt and sufficiency of such valuable consideration in order to fully bind me, my heirs, representatives, or assigns to the provisions of this Release.
- I specifically acknowledge and assume all risk and responsibilities relating to, directly or indirectly, Participant's participation in the Program, and specifically understand and agree that the University may





## Contact Information

**Head Coach:** Donald Smith

**Phone:** (205) 652-5571

**Email:** [cheer@uwa.edu](mailto:cheer@uwa.edu)