

# 2019 - 2020

## MEHLVILLE *CHEERLEADING* CLINICS AND TRYOUTS BASKETBALL SEASON

### **CLINICS:**

Tuesday, October 15 -- 2:30-4:00 on the track

Wednesday, October 16 -- 2:30-4:00 on the track

### **TRYOUTS:**

Thursday, October 17 -- 2:30-4:00 (location TBA)

Must have a physical packet, parent permission, proof of insurance, Athletic Fee (\$50) and teacher recommendations turned in prior to clinics and tryouts.

For more information see Mrs. Perrica room 302 or email [pudlowskij@msdr9.org](mailto:pudlowskij@msdr9.org).

## **General Information for Cheerleading**

# Basketball

*Clinics will be held on two afternoons in October. The purpose of the clinics is to learn the cheers necessary for tryouts and to practice the skills involved. A present member of the squad will teach the cheers and help in any way they can.*

## QUALIFICATIONS

1. **Must be in good standing where conduct, citizenship, and attitude are concerned.**
2. **Must meet state eligibility requirements.**
  - a. **Pass 5 classes previous semester.**
  - b. **Physical Exam dated after March 1, 2018.**
  - c. **Entire physical packet completed and signed.**
  - d. **Paid \$50 sports registration fee. (Reimbursed if you do not make the team.)**
3. **Must have three (3) teacher recommendation forms turned in by clinics. Please email [pudlowskij@msdr9.org](mailto:pudlowskij@msdr9.org) to get the evaluation link sent to you. From there, you need to forward the email to 3 teachers that you want to fill out the recommendation form for you.**
4. **Must bring student evaluation with purple participation card on the 1<sup>st</sup> day of clinics.**

**A cheerleader may NOT participate in any sport during a season which she/he is cheering unless approved at the start of making the team.**

## FUNDRAISING

**Cheerleaders will be expected to participate in at least two (2) fundraisers per season. If cheerleaders do not wish to participate in the fundraisers then a donation of the profit that would have been made will be expected instead of the actual fundraising. For example, if a cheerleader is expected to sell \$100.00 of candy and the profit from the \$100.00 of candy is \$50.00, the cheerleader will owe \$50.00 to the cheerleading program. If a problem occurs, the coaches will deal with the issue individually.**

## COST INVOLVED

**Still to be determined. Approximately \$250 for shoes, mid drift, briefs, personalized jacket, practice shorts, and three practice shirts. Uniforms, bag, and poms are property of the school district and will be returned at the end of the season. Damage to the school property or failure to return will result in a replacement fee to be paid by the student.**

# MEHLVILLE CHEERLEADING

We invite all students who are interested in trying out for the 2019-2020 cheerleading squads to attend clinics on Tuesday and Wednesday, October 15-16, on the track beginning at 2:30 pm and ending at 4:00 pm. It is not a requirement that candidates attend the clinics, but they have proven quite helpful in the past. The tryouts will be held on Thursday, October 17, at 2:30 pm where the location will be determined closer to the tryout. The tryouts will be closed to viewers.

The Missouri State High School Activities Association requires that all students have a physical exam and parent permission form on file in the Athletic Office before they can participate. The physical must be after March 1, 2018. You may NOT participate in clinics or tryouts until you have received a purple participation card from the Athletic Office.

## REQUIREMENTS

1. **Front/Side Hurdler, Toe Touch Jump, Tumbling**
2. **Formation Cheer – Learn at clinics**
3. **Sideline Chant – Learn at clinics**
4. **Physical Exam and Parent Permission**
5. **3 Teacher Recommendation forms which will be added into your score.**

## WHAT TO WEAR TO CLINICS AND TRYOUTS

1. **Solid White T-Shirt**
2. **Loose shorts to jump in (Dark, Solid Color)**
3. **Tennis Shoes**
4. **Hair pulled back away from face**

This is a tryout for the basketball season only.

**Note:** To tryout you must have a physical dated after March 1, 2018.

*Cheerleader Evaluation*      *Name:* \_\_\_\_\_  
*Please answer the following questions: MUST be filled out by the 1<sup>st</sup> day of clinics.*

1. **What are your two strongest characteristics that you will bring to the cheerleading squad and program? Explain.** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. **If you are on a squad with someone you dislike, how do you plan on handling this situation?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. **Why do you want to be a cheerleader?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. **What does it mean to you to be a Mehlville Cheerleader?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. **List any extracurricular activities, including work.** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COMMENTS:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*I, \_\_\_\_\_, certify that the information on this form is accurate to the best of my knowledge. If the information listed on this form is false I agree to forfeit any position I currently hold in the cheerleading program for the 2019-2020 school year.*

**CANDIDATE'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PARENT'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_