

# Thomas Dale High School



## Basketball Cheerleading Information Packet

**2018-2019**

**Dates to Remember:**

- |                             |   |
|-----------------------------|---|
| <b>Nov. 7, 8, 12 and 13</b> | <b>-Tryouts at Thomas Dale 6p-7:30p</b> |
| <b>Nov. 14th</b>            | <b>-Tryout Results Released</b>         |
| <b>Nov. 15th</b>            | <b>-First Day of Practice 6p-7:30</b>   |

We are so excited that you are interested in representing our school as a Thomas Dale Knight Cheerleader. Enclosed you will find a variety of information including permission slips, fees, important dates, teacher evaluation forms, and questions and answers. We look forward to another great year.

## CHEER PACKET & TRYOUT FORMS CHECKLIST

PLEASE RETURN THESE FORMS ON THE FIRST DAY OF TRYOUTS.

REMEMBER THAT STUDENTS WILL NOT BE ALLOWED TO PARTICIPATE IN TRYOUT PRACTICES OR TRYOUTS IF EVERYTHING LISTED BELOW ARE NOT TURNED IN.

- ✓ The sport medical (physical) form completed, signed, and dated by your physician and parent/guardian. If you are a current Thomas Dale high school athlete with a physical on file, please email [tdcheercoach@gmail.com](mailto:tdcheercoach@gmail.com). Your physical MUST be dated AFTER May 1, 2018.
- ✓ The "Information Sheet" completed, signed and dated by both parties.
- ✓ The "Statement of Permission and Agreement" signed and dated by both parties.
- ✓ The "2018 Tell Us About You" page completed by applicant.
- ✓ The "Parental Consent" form.
- ✓ Official report of grades. Participant must be eligible at the time of tryouts. There will be NO EXCEPTIONS.
- ✓ Teacher Recommendation Form completed by one teacher of choice.
- ✓ Attached photo. (wallet sized or 4x6)



Thomas Dale High School

COACH MARCUEL MILES – [TDCHEERCOACH@GMAIL.COM](mailto:TDCHEERCOACH@GMAIL.COM)

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Please complete the following information. Please write LEGIBLY.

<b>Student Name:</b>	<b>Student ID #:</b>
<b>Current Grade Level:</b>	<b>School you attended 2017-18:</b>
<b>Home Address:</b>	
<b>Home Phone:</b>	<b>Cell Phone:</b>
<b>Email address:</b>	<b>Birthday:</b>

<b>Parent/Guardian Name:</b>	
<b>Home address (if different from above)</b>	
<b>Parent/Guardian Phone (If different from above)</b>	
<b>Mother's Work Phone:</b>	<b>Mother's Cell Phone:</b>
<b>Mother's Email:</b>	
<b>Father's Work Phone:</b>	<b>Father's Cell Phone:</b>
<b>Father's Email:</b>	
<b>Emergency Contact Name:</b>	<b>Relationship to You:</b>
<b>Emergency Phone:</b>	<b>Emergency Cell Phone:</b>

**Allergies/Health Problems/ Medications (Please describe in detail):**

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**TELL US ABOUT YOU**

Cheerleading Experience:

Dance Experience:

Competition Experience (In any category):

Highest level of standing/running tumbling: (be specific)

Stunt position: (circle one or more): Main Base Assist Base Back Spot Flyer

Other Athletic Experience:

Why do you want to be a part of TDHS cheerleading?

What strengths will you bring to the team?

Please list any other activities that you are involved in.

Please list any time commitments besides cheerleading that you will be involved in for the 2018-2019 school year.

PARENTAL CONSENT  
2016-17 CHEERLEADING TRYOUTS

I, \_\_\_\_\_, parent/guardian of \_\_\_\_\_,  
give full permission to the above mentioned student to participate in Thomas Dale  
2018-19 cheerleading tryouts. My child and I understand the terms that were set forth  
and agree to follow them accordingly.

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

Parent/Guardian Name (printed) \_\_\_\_\_

Cheerleader Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Cheerleader Name (printed) \_\_\_\_\_

Emergency Contact During Tryouts:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to athlete \_\_\_\_\_

**If you make the cheerleading squad, realize that you are making a commitment to Thomas Dale High School, your coaches, your teammates, and yourself for the complete season. The decision to tryout should not be taken lightly. You will be expected to put cheerleading as one of your top priorities. Furthermore, as a representative of Thomas Dale, you must maintain proper behavior at all times. You must follow the cheerleading guidelines set forth in the Thomas Dale High School Cheerleading Constitution/Rules and Regulations. Students who break the rules will be disciplined. By making this commitment to the Thomas Dale High School Cheerleading program, you will receive many valuable and rewarding educational experiences that you will remember long after you graduate from high school. These activities will not only channel your enthusiasm and spirit in a constructive and beneficial manner, but will give you a sense of pride and accomplishment in being a part of a group that has earned the reputation as one of the finest in the state of Virginia.**

**Student Agreement**

**I, \_\_\_\_\_, have read and understand the 2018-2019 RULES FOR CHEERLEADING. I agree to abide by the policies described if I am chosen as a member of the squad. I am agreeing to the information in the packet and understand that failure to adhere to these rules policies could result in dismissal from the squad.**

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date Signed**

**Parent/Guardian Agreement**

**I, \_\_\_\_\_, the parent or legal guardian of \_\_\_\_\_, have read and understand the 2016-2017 RULES FOR CHEERLEADING and the 2016-2017 TRYOUT INFORMATION. I agree to abide by the policies described if my child is chosen as a member of the squad. I also agree to the financial obligations as they are described in the information provided. I understand that failure by me or my child to adhere to these policies could result in dismissal from the squad.**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date Signed**

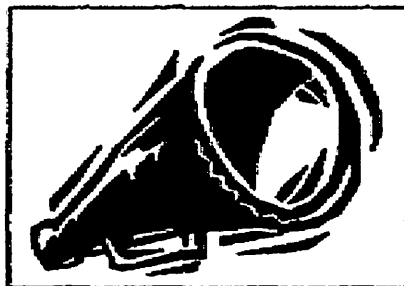
**REQUIREMENTS FOR 2018-19  
THOMAS DALE HIGH SCHOOL TRYOUTS**

**Each athlete will be scored in the following areas:**

- Spirit
- Motions
- Voice Projection
- Jumps
- Choreography execution (cheer and dance)

**Come to tryouts prepared:**

- Be on time
- Hair should be pulled up off of the shoulders. (no bows please)
- Cell phones should not be visible or heard during the tryout process
- Black shorts and a plain white tee should be worn
- White sneakers and no show socks should be worn
- Check in as soon as you arrive to receive your number
- Remember that your tryout process begins the moment you walk in



**TEACHER RECOMMENDATION FORM**  
**Thomas Dale Cheerleading**

Student Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Teacher Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Please rate the performance of the above named student using the scale provided. For responses rated a 1 or 2, please provide comments.

Activity	Needs Improvement					Excellent	Comments
	1	2	3	4	5		
Attends school on a regular basis	1	2	3	4	5		
Is on time to class	1	2	3	4	5		
Completes class assignments on time	1	2	3	4	5		
Displays school pride	1	2	3	4	5		
Respects and honors school environment	1	2	3	4	5		
Shows positive attitude in class	1	2	3	4	5		
Gets along well with others	1	2	3	4	5		
Demonstrates eagerness and capacity to learn	1	2	3	4	5		
Engages in school activities	1	2	3	4	5		
Shows ability to make and keep commitments	1	2	3	4	5		
Receptive to new ideas	1	2	3	4	5		
Accepts responsibility	1	2	3	4	5		
Demonstrates initiative	1	2	3	4	5		

What do you see as the student's area(s) of strength?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
 Signature of Teacher

\_\_\_\_\_  
 Date



## PROJECTED COSTS

Each cheerleader will be responsible for \$200.00 in fees for our 2018-19 season. A team fundraiser will take place to kick off our season.

COACH MARCQUEL MILES – [TDCHEERCOACH@GMAIL.COM](mailto:TDCHEERCOACH@GMAIL.COM)

