

Cheerleading Application

**PLEASE ATTACH A COPY OF YOUR 1st Semester Grades*

Name: _____

Present Grade: 8th Freshman Sophomore Junior

Address: _____

Parent/Guardian: _____

Cell Phone: _____ Home Phone: _____

Please list each of your classes and your teacher's name:

HOUR	SUBJECT	TEACHER
1 (1 st SEM)		
1 (2 nd SEM)		
2 (1 st SEM)		
2 (2 nd SEM)		
3 (1 st SEM)		
3 (2 nd SEM)		
4 (1 st SEM)		
4 (2 nd SEM)		
5 (1 st SEM)		
5 (2 nd SEM)		
6 (1 st SEM)		
6 (2 nd SEM)		
7 (1 st SEM)		
7 (2 nd SEM)		

I understand the time commitment, duties, and behavioral and financial responsibilities of participating in the cheerleading program.

Participant Signature

Date

Parent/Guardian Signature

Date