CONNECT CHEER NW 2017-18 TRYOUT QUESTIONNAIRE

NAME: _____ **TRYOUT #**_____
(Assigned at tryouts)

AGE: _____ **Grade:** _____

NEW TO ALL STAR CHEER?: **YES** **NO** *(circle one)*

If NO, NUMBER OF ALL STAR SEASONS COMPLETED: _____

If NO, last division that you competed in: _____

HIGHEST TUMBLING SKILLS MASTERED WITHOUT A SPOT:

LIST ANY PRIOR DANCE, GYMNASTICS, RECREATIONAL OR HIGH SCHOOL CHEER EXPERIENCE:

ARE YOU WILLING TO COMPETE ON 2 TEAMS IF NEEDED?: **YES** **NO**

AGE DIVISION/LEVEL YOU ARE YOU HOPING TO BE PLACED?_____

ANY SPECIAL SCHEDULING OR CARPOOLING ISSUES?:

ANY FAMILY VACATIONS PLANNED THAT WE NEED TO BE AWARE OF?