

**\*\*While illness, or injury are not anticipated, cheerleaders may want to have a video of cheer technique, or tumbling in case the unexpected occurs. (This will ensure consideration for the team given unforeseen circumstances.)**

**Student Information Form**

(Please print)

Student Name: \_\_\_\_\_ 20-21Grade: \_\_\_\_\_

Address:

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Guardian Contact:

Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Student Cell: \_\_\_\_\_

Parent Email: \_\_\_\_\_

Any potential allergies/illnesses that may affect team participation or need treatment during the season:

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**Cheerleader Contract**

I have read and agree to uphold the handbook for WAHS cheerleaders. I realize that cheerleading is a tremendous, time-consuming responsibility. I will cooperate fully with the coach and all persons and organizations associated with WAHS to promote spirit and good sportsmanlike conduct. At all times, whether at school, or away from school, I will conduct myself in a manner that will admirably reflect upon my school, squad, and myself. I understand that the demerit system in place is non negotiable and willingly accept the terms of the demerit system and will adhere to any and all consequences. I understand that the coach has the ultimate say in team/member decisions and will respect any and all decisions made by the coach.

By signing this form, I understand that dismissal from the squad is a possible consequence for violating any part of the guidelines or handbooks provided by WAHS and ABSS.

\_\_\_\_\_  
(Student signature) (Date) (Parent signature) (Date)

**CODE OF CONDUCT AGREEMENT**

I have read and understand what is expected of me and my responsibilities as a squad member. I agree to adhere to and uphold the rules, regulations, and code of conduct that has been developed and distributed to me.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DEMERIT SYSTEM ACKNOWLEDGEMENT**

I hereby state that I understand the demerit system in place and accept any consequences for violating this system. I understand that the coach makes all decisions and decisions are final and non negotiable.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Parental Permission Form**

\_\_\_\_\_ has our permission to tryout for cheerleading at WAHS. If selected, our child has our permission to participate as a member of the cheerleading squad for the coming year.

We understand the rules and regulations established for all cheerleaders and understand the responsibilities of being a cheerleader. We also understand the role we must assume as parents of a cheerleader, and we will assist in every way to see that these rules and regulations are enforced.

We also agree that the school and coach will assume no responsibility for any accident or injury that may occur at school, during practice, or at any event away from school. We also understand that we are responsible for providing accident insurance for our child. We agree to comply with the state athletic association's requirement to maintain a current physical form that is in effect at tryouts through the end of the cheer season.

We understand that the majority of the cost for uniforms and camp will be assumed by the parents, even though some of this cost may be deferred by fundraisers.

We understand that team placement is ultimately decided by the coach and/or other participating school staff for the 2020-2021 season due to the inability to outsource tryouts during the pandemic and agree to respect these placement decisions made during tryouts.

We do hereby give our consent for our child to be a cheerleader at WAHS for the coming year.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Cellphone: \_\_\_\_\_

\_\_\_ My child is **NOT** covered by the school accident insurance plan, but **IS** covered by our family insurance plan.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_