



TRYOUT # _____
OFFICE USE ONLY

OFFICE USE ONLY. LEAVE THIS SIDE BLANK.

NAME: _____

LEVEL 5

TUMBLING SKILL

TECHNIQUE

LEVEL APPROPRIATE

____ TOE BACK TUCK	BELOW	AVERAGE	ABOVE
____ 2 BHS TO LAYOUT	BELOW	AVERAGE	ABOVE
____ ROUND OFF BHS FULL	BELOW	AVERAGE	ABOVE

ADVANCED

____ BACK TUCK 2 BHS LAYOUT	BELOW	AVERAGE	ABOVE
____ FWO TO FULL	BELOW	AVERAGE	ABOVE
____ WHIP TO FULL	BELOW	AVERAGE	ABOVE

ELITE

____ 2 BHS WHIP TUCK	BELOW	AVERAGE	ABOVE
____ PUNCH FRONT TO FULL	BELOW	AVERAGE	ABOVE
____ ARABIAN	BELOW	AVERAGE	ABOVE

FILL OUT THIS SIDE COMPLETELY.

NAME: _____

BIRTHDAY: _____

SHIRT SIZE: (YS) (YM) (YL) (AS) (AM) (AL) (AXL)

STUNT EXPERIENCE: (NONE) (FLYER) (BASE) (BACK SPOT)

PARENT(S)/GUARDIAN(S) _____

ADDRESS: _____

PHONE: _____ ALTERNATE PHONE: _____

EMAIL: _____

WHAT PART OF THE PROGRAM ARE YOU TRYING OUT FOR? (CIRCLE ONE)

(ELITE) (PREP) (EXHIBITION)

ARE YOU WILLING TO DOUBLE-TEAM? (YES) (NO) (NOT SURE)

WHAT SCHOOL DO YOU ATTEND? _____

LIST ALL DATES THAT AFFECT ATTENDANCE BEGINNING MAY 6th, 2024 to APRIL 30th, 2025.
LISTING CONFLICTS DOES NOT EXCUSE ABSENCES.

SCHOOL CONFLICTS: _____

VACATIONS: _____

SPORTS CONFLICTS: _____

OTHER: _____
