

COLLEGE OF THE DESERT

ROADRUNNER



CHEER SQUAD

2008-2009

Tryout Packet

COD CHEER SQUAD TRYOUT INFORMATION

Pre-Tryouts - Monday April 28th, 2008
3:30pm-5:30pm
College Football Field
Tuesday April 29th, 2008
3:30pm-5:30pm
College Football Field

Try-Outs- Wednesday April 30th, 2008
3:30am-5:30pm
College Football Field

Results - Wednesday April 30th, 2008
6:00pm

We are excited that you have chosen to tryout for a position on the College of the Desert Roadrunner Cheer Squad. Tryouts will have judges and is closed to the public. To participate in the tryout process, please complete and bring all forms, complete tryout packet, signed constitution, application fee, and front/back copy of medical insurance card, current photograph, and letter of recommendation from a coach or instructor by due date.

**NO LATER! MUST BE COMPLETE AND TURNED INTO COACH OR ATHLETIC OFFICE TO BE ABLE TO TRY-OUT!
DUE NO LATER THAN Monday April 28th, 2008!!!**

-
- ☀ Student Information**
 - ☀ Application and Fee**
 - ☀ Size Sheet**
 - ☀ Recommendation Letter**
 - ☀ School Schedule Fall 2008**
 - ☀ Current photo**
 - ☀ Copy of Insurance Card**
 - ☀ Participation Release**

Cheer Squad Tryouts

Letter of Recommendation

Due by FRIDAY APRIL 25TH, 2008

Applicant: _____

Email: _____

Phone #: _____

(Please provide the respondent a stamped, addressed envelope with this form.)

Respondent: _____

Position/ Title: _____

Phone #: _____

(This form will remain confidential.)

Please assess the applicant by checking the boxes contained in the below chart. How long have you know the applicant?

What is your relation to the applicant?:

What are their strengths?

What are their weaknesses?

	Poor				Excellent
Attitude	1	2	3	4	5
Work Ethic	1	2	3	4	5
Team player	1	2	3	4	5
Reliability	1	2	3	4	5
Leadership	1	2	3	4	5
Teach ability	1	2	3	4	5

Thanks for your evaluation of this applicant. If you would like to contact me for any reason I can be reached at (760) 238-8899 or e-mail codcheercoach@verizon.net you can also fax to (760) 862-1362

Please mail to:
 COD Cheer Team
 Att: Coach Sheila
 43-500 Monterey Avenue
 Palm Desert, Ca. 92260

CHEERLEADING STUDENT INFORMATION

Name: _____

_____ **Last** _____ **First** _____ **Middle** _____
Male or Female: _____ **Age:** _____ **Height:** _____ **Weight:** _____

Cell Phone #: _____

Home Phone #: _____

E-mail Address: _____

Mother's Name: _____ **Work Phone:** _____

Father's Name: _____ **Work Phone:** _____

Parent's Home Phone: _____

Parent's Cell Phones: _____

Permanent Address: _____

City: _____ **State:** _____ **Zip Code:** _____

High School Attended: _____

Graduation Date: ____/____/____

College of the Desert: *Fall 2008*

Class Standing: Freshman _____ sophomore _____

Units enrolled: _____

EXPERIENCE

Position: Top / Base / Back Spot/ Front Spot (circle)

High School Cheerleading Years: _____ **Coach's Name:** _____

High School's Phone Number

HS Cheer Coach's Phone Number

All-Star Team Name: _____ year's _____

All-Star Coach's Name: _____

All-Star Gym's Phone Number

All-Star Coach's phone Number

CHEERLEADING SIZE SHEET

Name: _____

Cell Phone: _____ Home Phone: _____

E-Mail: _____

T-Shirt Size

XS S M L XL XXL

Short Size

XS S M L XL XXL

Warm-up Top Size

S M L XL XXL

Warm-up Bottom Size

S M L XL XXL

Shoe Size _____

* FEMALES*

UNIFORM SHELL SIZE

UNIFORM SKIRT SIZE

MALES

UNIFORM TOP SIZE

UNIFORM PANT SIZE

**COLLEGE OF THE DESERT
CHEER SQUAD
Tryout Application**

**Place
Photo
Here**

Non- Refundable Application Fee: \$30.00

Cash or Check made out to: COD Varsity Cheer

I _____ understand the tryout procedure, constitution contract, and completely understand what is expected of me if I am selected to become a part of the 2008-2009 College of the Desert cheer squad. I understand that the program runs year round. I also understand that if for some reason I can no longer participate with the team I will be responsible for any financial debt owed to the school. By failing to do so the COLLEGE OF THE DESERT can and will place all registration and documents on hold until cleared. I (we) hereby give my approval for my son/daughter to tryout for the COD Cheer Squad. I (we) release COD, the COD Cheer Squad advisor, coach, clinic instructors, and administration from any responsibility related to injury.

Applicant: _____ Date: _____

Parent/ Guardian: _____ Date: _____

I have read the constitution contract and I understand the policies and conduct expected in this year round program. I will abide by these rules and any other deemed necessary throughout the tryout and program year.

Applicant Signature: _____ Date: _____

Parent/ Guardian Signature: _____ Date: _____

**Questions contact Cheer Coach and Advisor: Sheila Ribas (760) 238-8899
Mail to: COD Cheer Team Att: Coach Sheila 43500 Monterey Ave. Palm
Desert, CA. 92260 or Turn into Athletic office at the College**

For office use only:
Admitted _____ Application _____ Tryout Fee _____ Letter of Recommendation _____