

# Cheer Academy All Stars

07

Competitive Season

08

## Tryout Information

**Tryout Clinic:** Tuesday, May 8<sup>th</sup> and Thursday, May 10<sup>th</sup> from 6:00 PM till 9:00 PM

**Actual Tryouts:** Tuesday, May 15<sup>th</sup> and Thursday, May 17<sup>th</sup> by appointment\*

During the clinics, all candidates will learn the material they will be required to perform during their individual tryout including a dance and motion sequence. In addition, each candidate will be required to execute a combination jump sequence and demonstrate their standing and running tumbling skills. Stunting skills will be evaluated and scored for each candidate during the tryout clinic.

Candidates should dress comfortably in shorts, t-shirt, sneakers and socks. Hair must be tied up and off the face and no jewelry is permitted.

\*A tryout time can be scheduled once a candidate has completed the registration process. Simply call the gym at 732-568-9555 and ask to speak with Robin **OR** send her an e-mail at [NJATA1@aol.com](mailto:NJATA1@aol.com) requesting a time slot between the hours of 6:00 and 9:00 PM on either May 15<sup>th</sup> or 17<sup>th</sup>. Please remember that all candidates must arrive 30 minutes earlier than their confirmed tryout time. Candidates will tryout in groups of three. All candidates will be required to demonstrate the materials learned during the tryout clinic. Tryouts will be closed to general viewing.

All candidates must be sized for practice gear for the 2007-2008 competitive season on May 15<sup>th</sup> or 17<sup>th</sup>. We cannot guarantee delivery of practice gear for the beginning of July if they are not sized on 15<sup>th</sup> or the 17<sup>th</sup>. All candidates must arrive 30 minutes before their actual tryout time so that proper sizing can be accomplished. Candidates should bring a check for \$95.00 made payable to AAPG to the sizing/tryout. We strongly recommend that each candidate have a parent present at the sizing. In the event that a candidate does not make a team at CAAS, the amount paid for practice gear will be returned for any items that have not been worn.

Immediate team placements will be announced in writing. Candidates will be given a letter of acceptance to sign. The letter must be signed and returned no later than 5:00 PM on the pre-determined date to secure their spot on a team.

Teams will begin practice in June, 2007.

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## Check List

To register for tryouts, please return the following:

- \_\_\_\_\_ Cheer Academy Tryout Registration Form (with photo attached.)
- \_\_\_\_\_ All-Star Cheer & Dance Academy - Cheer Academy All-Stars Medical Release Form
- \_\_\_\_\_ \$25.00 Tryout Registration Fee

When you attend tryouts, please return the following:

- \_\_\_\_\_ EZ Pay sheet
- \_\_\_\_\_ CAAS Agreement Form
- \_\_\_\_\_ Pick up your copy of the CAAS Handbook (will be distributed on May 8<sup>th</sup> at the parent orientation meeting)
- \_\_\_\_\_ Practice Gear order form must be completed upon sizing

Please keep the following for your records:

- \_\_\_\_\_ CAAS Handbook (will be distributed on May 8<sup>th</sup> at the parent orientation meeting)
- \_\_\_\_\_ Important Dates List
- \_\_\_\_\_ Expense Form for the 2007 – 2008 Competitive Season
- \_\_\_\_\_ USASF Skill Level Chart

Please keep the following for future use:

- \_\_\_\_\_ Absence Request Form

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## Tryout Registration Form

### Personal Information

Candidate's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Parent work phone: \_\_\_\_\_

Parent cell phone: \_\_\_\_\_ Email: \_\_\_\_\_

Home Address \_\_\_\_\_

City: \_\_\_\_\_, NJ Zip: \_\_\_\_\_

Candidate's Age on May 31<sup>st</sup>, 2007: \_\_\_\_\_ Candidate's grade for 2007/2008: \_\_\_\_\_

Candidate's cell phone: \_\_\_\_\_ Candidate's email: \_\_\_\_\_

Emergency Contact Name and number: \_\_\_\_\_

Division Tryout: ? Gold (Full Year) ? Purple (Beginning in November)

### Prior Cheer Experience:

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### Religious Commitments for 2007/2008:

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### Attach Photo Here:

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## AGREEMENT

We are looking forward to an outstanding season. Please help us by following the guidelines set forth in this packet and the Cheer Academy handbook. Coaches and cheerleaders all agree to the same rules at the start of the season. It is the coach's obligation to enforce the rules as they are detailed in the handbook.

When you have read and understood everything in this packet and the handbook, please sign below signifying that you understand the commitment required and that you agree to abide by all rules and policies set forth by Cheer Academy All Stars.

**I, the undersigned athlete and parent, agree to abide by the rules and policies of Cheer Academy All Stars and the All Star Training Academy as outlined in the Cheer Academy Tryout Packet and the Cheer Academy Handbook. I further understand that if the athlete named below makes a team at Cheer Academy, it is a full year commitment that includes camps, practices, competitions and other activities that Cheer Academy deems necessary. I also understand that I am entering into an obligation that requires my full time and financial commitment. I, the undersigned, further agree and acknowledge that competitive cheerleading is a highly competitive sport and team members may be moved to a team that is better suited to their skill. I further understand that there will be NO refunds (competition fees, clothing costs, gym fees, etc.) to anyone who quits or is dismissed from the program. Anyone who leaves or is dismissed is immediately responsible for all debts, including but not limited to the full amount of yearly training fees, competition costs, hotel fees and legal fees.**

Candidate's Name (Print) \_\_\_\_\_

Candidate's Signature \_\_\_\_\_

Parent's Name \_\_\_\_\_

Parent's Signature \_\_\_\_\_

NOTARY ENDORSEMENT:

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## Absence Request Form

Date you will be absent: \_\_\_\_\_

Reason For Absence: \_\_\_\_\_

\_\_\_\_\_

I, \_\_\_\_\_ am requesting to be absent from practice on the date above. I know that missing practice places complications and difficulties on the whole team. I also understand that an unexcused absence or continued excused absences can result in being placed in an alternate position or removal from the squad.

Cheerleader Signature \_\_\_\_\_ Date \_\_\_\_\_

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

### **Notes (Office use only):**

Coach's signature \_\_\_\_\_

Excused \_\_\_\_\_ Unexcused \_\_\_\_\_

Form Returned to Athlete on: \_\_\_\_\_

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## Important Dates

May 8 & 10, 2007	Tryout Clinics
May 15 & 17, 2007	Tryouts
May 28, 2007	Gym closed for Memorial Day
July 4, 2007	No Practice – Gym Closed - Independence Day
July 16 -19, 2007	Team Week / Stunt Camp
July 20, 2007	CAAS Beach Trip
September 3, 2007	No Practice – Gym Closed -Labor Day
September 13, 2007	Excused Absence -Rosh Hashanah
September 22, 2007	Excused Absence -Yom Kippur
October 2007	Somerville Fall Festival – Volunteer at our table!
October 31, 2007	No Practice –Halloween
November 6	Election Day - <i>Please go vote!</i>
November 22, 2006	No Practice – Thanksgiving
December 5, 2007	Excused Absence - First Day of Chanukah
December 23, 2007	Cheer Academy Holiday Party
December 24, 2007	<b>January 2, 2008</b> – No Practice - Winter Break
January, 2008	Cheer Academy Competition
March 23, 2008	Excused Absence – Easter
April 27, 2008	<i>Tentative Date</i> -End of the Year Banquet

The Choreography Camp dates will be announced when team placements are announced.

Competition Dates will be announced right around September 1, 2007

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## USASF Level Guidelines

Each athlete is viewed as an essential part of their designated team. This placement is based on executed skill, dedication, attitude, and reliability of the individual athlete. The sport of competitive cheerleading is now governed by the Rules and Standards set by the United States All Star Federation, [www.usasf.net](http://www.usasf.net). The same standard is used to determine team placement and competition divisions. Please view the chart below for a better understanding of these standards.

LEVEL	Running Tumbling	Standing Tumbling	Stunting	Jumps	Baskets
1	Forward and backward rolls, front and back walkovers, handstands, cartwheels and roundoffs.	Forward and backward rolls, front and back walkovers, handstands, cartwheels and roundoffs.	No extended stunts allowed	Any jump may be performed.	None
2	Back handspring series	Back Handspring	Single leg prep level stunt and double based extensions	Simple jump sequence	Straight Ride
3	Flips may be performed in tuck position only from a round off or round off back handspring entry. (Example: Round off back handspring tuck.)	Series front and back handsprings	Extended single leg stunts with straight cradle and double based extended stunts with single twist cradle	Jump sequence into a back handspring	Single trick without twist or single twist without a trick.
4	Skills are limited to 1 flipping and 0 twisting rotations. (Example: Round off back handspring layout.)	Standing Tuck	Single leg extended stunt with single twist cradle or double based extended stunt with double twist cradle.	Toe Touch back handspring back tuck.	Kick fulls or double twist basket without trick.
5	Skills are limited to 1 flipping and 2 twisting rotations. (Example: double full.)	Standing Full or standing double full.	Single leg extended stunt with double twist cradle.	Triple toe touch into a standing tuck.	Up to 2-1/4 twisting rotations allowed. (Example: Double kick fulls and kick kick double fulls.)

**Divisions are no longer based on grade.**

**For the 2007/2008 competitive season, all divisions will be based on a athlete's age as of May 31st, 2007.**

Tiny - 5 years and younger

Mini - 8 years and younger

Youth - 11 years and younger

Junior - 14 years and younger

Senior - 18 years and no younger than 10 years old

# All-Star Training Academy, Inc./Cheer Academy All-Stars, Inc.

## **Medical Treatment Authorization and Liability Release**

I, the undersigned parent or guardian, do hereby grant permission for my daughter/son, \_\_\_\_\_, to participate in the activity of cheerleading and tumbling gymnastics at the NJ All-Star Training Academy, Inc. (NJATA) and NJ Cheer Academy All-Stars, Inc. (NJCA). In order that my daughter/son may receive the necessary medical treatment in the event she/he may sustain injury or illness during participation in this activity, I hereby authorize the cheerleading coach or other supervisor obtain medical treatment for my daughter/son for such an injury or illness during the activity, and exercise of authority.

I understand that this activity involves risk to the participant, I further acknowledge and understand that due to the nature of this activity, which involves inversion and rotation of the body, there is a possibility that my daughter/son may sustain physical illness or injury, minimal, serious, or catastrophic), in connection with her or his participation. I further acknowledge and understand that my daughter/son is assuming the risk of such illness or injury through her/his participation, and I further release the NJ All-Star Training Academy, Inc. and NJ Cheer Academy All-Stars, Inc. and it's representatives from any claims for personal illness or injury that my daughter/son may sustain during participation in this activity.

I further understand that the NJ All-Star Training Academy, Inc. and NJ Cheer Academy All-Stars, Inc. has established rules and regulations pertaining to conduct, behavior and activities of all students and cheerleading participants, by which my daughter/son must abide during participation in this activity, and that my daughter/son and I will be responsible for her/his failure to abide by those rules and regulations.

I further grant permission to the NJ All-Star Training Academy, Inc. and NJ Cheer Academy All-Stars, Inc. to photograph my daughter/son during the aforementioned activities for use in publications and advertisements to promote NJ All-Star Training Academy, Inc. and affiliated companies.

**ACTIVITY DESCRIPTION: CHEERLEADING AND TUMBLING ATHLETICS including but not limited to tumbling, stunting, jumping, cheerleading, dancing, conditioning and related exercises/ physical activities. Instruction can be done in a camp, clinic, class or team practice setting. This wavier also releases NJATA & NJCA along with any school facility that may be rented for the annual cheerleading competition hosted by NJCA.**

*This release is in effect for a full year from the date this is signed. This form must be kept current and it is the participant's parent or guardian responsibility to notify NJATA/NJCA with any changes.*

**DATE:** \_\_\_\_\_

Participants Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Beeper: \_\_\_\_\_

Parents' Names: Mother \_\_\_\_\_ Work # \_\_\_\_\_

Father \_\_\_\_\_ Work # \_\_\_\_\_

Parent E-Mail Addresses: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Student E-mail Address: \_\_\_\_\_

Please List any Custody Restrictions: \_\_\_\_\_

### **MEDICAL INFORMATION**

My daughter/son is in good physical condition and currently is under no restrictions with regard to physical activity. If my child is in need of Medical attention, and I can not be reached immediately, I grant permission for my child to receive the necessary medical attention.

EXISTING MEDICAL CONDITION(S): \_\_\_\_\_

MEDICATION(S): \_\_\_\_\_ ALLERGIES \_\_\_\_\_

MEDICAL INSURANCE COMPANY: \_\_\_\_\_ POLICY #: \_\_\_\_\_

DOCTOR'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_ PREFERRED HOSPITAL: \_\_\_\_\_

EMERGENCY CONTACT NAME (NOT SELF): \_\_\_\_\_ PHONE: \_\_\_\_\_

I/we have read and fully understand all of the above information and attest that given medical information is correct.

\_\_\_\_\_  
PARENT/ LEGAL GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARTICIPANT'S SIGNATURE

\_\_\_\_\_  
DATE