

CENTRAL COMMUNITY ATHLETICS, LLC
 10510 Joor Road, Central, LA 70818
 225-936-2553/info@centralcommunityathletics.com
"The Spirit of Central"

Central Rec Competition Cheer Try Out Form

Please have this form completed and return to coaches on day of tryouts along with tryout fee.
 (returning members \$15, new members \$20)

Athlete's Name: _____ Age (as of Aug 31st): _____

Parent Name: _____ Phone No.: _____

Email Address: _____

School: _____ Grade: _____

Have you ever cheered before? Y N Where? _____

I, _____, parent of _____, give permission to try out for the Central Rec Competition. I release CCA of any responsibility should he/she be injured the day of tryouts. I also understand he/she is trying out for a competitive cheer team and the responsibilities associated with this organization.

Parent Signature: _____ Date: _____

**Would you be interested in attending Nationals in Disneyworld on February 11, 2018?
 Yes No Maybe (I need more info)

For CCA Staff: _____ Athlete's #: _____

SKILL	COMMENTS
Jumps	
Motions Cheer/Dance	
Standing Tumbling	
Running Tumbling	

Recommended Team Placement: _____