



2012

DANCE TEAM TRYOUT APPLICATION

Completely fill out, sign and return the following Application and Waiver to the Spokane Shock in person, by mail (cash, check, money order, or credit card payment), or by fax (credit card payment only). Day of registrations will be taken but only with cash or check.

Mailing Address:

Spokane Shock Dance Tryout
3212 N. Eden Rd. Ste. B
Spokane Valley, WA 99216

Fax Number:

(509) 926-1075

PERSONAL & EMPLOYMENT

First Name _____ Last Name _____ Middle Initial _____

Home Address _____

City _____ State _____ Zip _____

Home Phone# _____ E-mail _____

Employer &/or School _____ Work Phone # _____

Occupation _____ Full Time [] Part Time []

Birth date _____ Age _____ State of Birth _____ Marital Status _____

Height _____ Weight _____ T-Shirt Size _____ Waist Size _____

Father's Name _____ Mother's Name _____

Parents' Home Phone # _____ Parents' Work Phone # _____

Parents' Address _____

City _____ State _____ Zip _____

Have you ever been arrested? [] yes [] no If yes, why? _____

Phone # through which you can always be reached during the audition period:

Name _____ Phone # _____



EDUCATIONAL DATA:

Name of High School Completed _____ State _____ Date _____
College/University _____ Current Year _____
Major _____ Minor _____
Have you graduated? yes no If yes, when? _____

AWARDS & HONORS: List scholastic/extracurricular achievements of which you are proud:

HOBBIES & INTERESTS:

PROFESSIONAL EXPERIENCE:

Have you ever performed professionally or for a college (cheer or dance team)? yes no
If yes, WHEN: _____ WHERE: _____ WITH WHOM: _____

Have you ever auditioned for the Spokane Shock Dance Team before? yes no
If yes, When? _____ To which round did you advance? _____

In one sentence, please define the “goal” you hope to achieve as a Spokane Shock Dancer:

HOW DID YOU HEAR ABOUT THE SPOKANE SHOCK DANCE TEAM AUDITIONS?

- Radio. Which station? _____
- Television. Which station? _____
- Newspaper. Which one? _____
- Internet. Which site? _____
- Drill Team/Cheerleader Director. Who? _____
- Fitness Center. Which one? _____
- Dance Studio. Which one? _____
- College/Sorority Bulletin Board. Where? _____
- Friend. Who? _____
- Other: _____

YOUR SIGNATURE _____ **DATE** _____

YOU MUST BE AT LEAST 18 YEARS OF AGE BY MARCH 19TH 2011.

APPLICATION MUST BE FILLED OUT IN FULL IN ORDER TO BE PROCESSED



**SPOKANE SHOCK DANCE TEAM
"WAIVER AND RELEASE"**

The undersigned requests that she be allowed to demonstrate her skill and ability as a contestant during the auditions for the SPOKANE SHOCK DANCE TEAM (SSDT). In consideration of being afforded such opportunity, the undersigned hereby assumes the risk of injury inherent in such activity and agrees to hold harmless and waives any claim for damages against Spokane Shock Football, LLC; Washington State University; the arenafootball2 League; and the Arena Football League; and any and all agents of the same for any injuries and/or economic damages that may be sustained by the undersigned during such demonstration.

In recognition of the media coverage of the SPOKANE SHOCK DANCE TEAM (SSDT) and applicants thereto, the undersigned grants the SSDT and its licensees her permission and authority to use her name, voice, picture, and likeness in connection with any and all publications, media broadcasts, promotional photographs, promotional posters, websites, commercial products, including but not limited to calendars, team pictures, T-shirts, and any other commercial items.

In further consideration of SSDT allowing the undersigned to audition for SSDT, and in the event the undersigned is offered employment to become a member of SSDT, she hereby understands and agrees that as a condition of employment, she must sign the standard SSDT Agreement and provide written authorization under the Fair Credit Reporting Act for SSDT to conduct a background check.

The undersigned understands and agrees that SSDT and/or its authorized agents may conduct one or more background checks to obtain information about her current and past employment, education, activities, character, reputation, personal characteristics (including age), and mode of living, including, but not limited to, academic, residential, achievement, performance, conduct, disciplinary, attendance, criminal, credit and driving records, from various federal, state, and local governmental, law enforcement, and motor vehicle agencies, consumer reporting agencies, previous employers, schools, companies, corporations, partnerships, and other entities or persons. This information will be used to evaluate the undersigned as an applicant for employment and, if hired, for any other employment purpose. The undersigned further authorizes any person, entity or agency contacted by SSDT or its authorized agents to furnish the above-mentioned information. If a background check reveals that the undersigned has provided inaccurate information or omitted information on the SSDT application, then it may result in the rejection of her application or, if already employed, in the termination of her employment.

The undersigned recognizes and understands that she may be drug tested with or without warning and will be released from the squad – if positive results occur.

By signing this SSDT Waiver and Release, the undersigned warrants that she will be at least eighteen (18) years of age by March 19, 2010.

DATE: _____

(Print name)

(Signature)

PAYMENT:

PAYMENT INFORMATION: \$25.00 Payable by:

- Check/Money Order:** Return form and check (payable to Spokane Shock) by MAIL or in person
 Credit Card: Return by mail or fax.

Card Number: _____ **Confirmation Code:** _____ **Exp. Date:** _____

*I authorize the Spokane Shock to charge my credit card \$25.00 as a registration fee for the Spokane Shock Dance Team tryout in Spokane, WA. I acknowledge that my payment shall be absolutely **non-refundable**.*

Signature: _____ (if paying by credit card)

Tryout Procedure

- All girls are required to wear two piece form fitting clothes.
- Dance or athletic half-top (stomach must be showing).
- Dance trunks, skirt, or shorts (no full length pants).
- Shoes with non-marking soles.
- Performance ready hair and make-up.
- Please don't wear sweats, or baggy clothing.

Tryout Procedure

- Tryouts will be Satday January 7th from 12:00 pm to 4:00 pm.
- Check-in will start at 11:00 am.
- The tryout is located at the Shock Facility at **3212 N. Eden Rd. Spokane Valley 99216**
- The first day will be devoted to learning a group dance choreographed by Maggie Kazemba, the Shock Dance Team Director.
 - This dance will be performed in front of a select group of judges.
- A selected group of girls will be asked to come back on Sunday and Monday to go through an interviewing process during this time.

Dance Team Tryout Finals

- The date is January 18th and the location is TBD
- A detailed schedule will be provided to the finalists after the first day of tryouts.

PLEASE BE SURE YOU HAVE COMPLETED ALL OF THE FOLLOWING:

1. COMPLETED SPOKANE SHOCK DANCE TEAM APPLICATION
2. SIGNED "WAIVER AND RELEASE" FORM (see above)
3. \$25 (non-refundable) Check or money order made payable to SPOKANE SHOCK FOOTBALL.
4. **Photos** (Non-returnable). You're not being judged by photo; it is for identification purposes only and therefore doesn't need to be professional. Please provide both a headshot and one full-body shot (5"x7" or larger preferred).

