

2011-12 UT Spartans Dance Team Application

Name: _____ Birth Date: _____

Cell phone: _____ Student ID: _____

Campus Box #: _____ Student Status: _____ Major: _____

Primary Email: _____

Local Address or Dorm: _____

City: _____ Zip: _____

Shoe Size: _____ Shirt Size: _____ Short Size: _____

List all previous dance experience: _____

What are your greatest strengths and skills as a dancer and what would you contribute to the team? _____

Why are you interested in becoming a Spartans Dancer? _____

What other clubs, sports, and extracurricular activities do you participate in? _____

Class and Work Schedule (please be specific):

Sunday: _____
Monday: _____
Tuesday: _____
Wednesday: _____
Thursday: _____
Friday: _____
Saturday: _____
Other: _____

Please list any personal web pages you have (include screen name if applicable or email address registered to).

Myspace: _____
Facebook: _____
Twitter: _____
Linked In: _____
Other: _____

Please list any allergies: _____

Please list any medications: _____

Please list any injuries or physical limitations: _____

Liability Waiver

By signing this agreement, I _____ confirm that I am medically and physically okay to participate in all cheerleading tryout activities such as, but not limited to, jumping, stunting, tumbling, stretching, cardio, weights and endurance training. Any allergies or limitations are fully disclosed above. I release all liability of injury during the tryout process and take responsibility of my own health and wellness for such activities.

Signed: _____ Date: _____

Printed Name: _____