



2021-2022

Lyford Middle School Cheerleader/Mascot

## Application Packet

### CHECKLIST

Candidate Name: \_\_\_\_\_

Next Year Grade Level: \_\_\_\_\_

**\*\*\*All paperwork due: Monday, February 22, 2021\*\*\***

Paid in full (prior season) \_\_\_\_\_

Application for Tryouts \_\_\_\_\_

Emergency Information Form \_\_\_\_\_

Insurance Form \_\_\_\_\_

Release Form \_\_\_\_\_

Receipt of Constitution Form \_\_\_\_\_

Financial Agreement \_\_\_\_\_

Physical Form \_\_\_\_\_

Member Information Card \_\_\_\_\_

Student Random Drug Testing Form \_\_\_\_\_

Please make sure each criterion is checked off.

# 2021-2022 LMS Cheerleader Tryout Procedures

Cheer Tryout Practice	Cheer Tryout Date
Monday 3/8 - 4:20-5:20	
Tuesday 3/9 - 4:20-5:20	
Wednesday 3/10- 4:20- 5:20	Friday, March 12 <sup>th</sup> , 2021 at 1:00pm
Thursday 3/11- 4:20-5:20	



## **2021-2022 LMS Cheerleader Tryout Procedures**

### **Eligibility**

- Less than 19 years old before tryouts
- Have not graduated from High School
- Have been in regular attendance at Lyford CISD or in regular attendance for 15 days prior to tryouts
- Full time day students
- Are enrolled in a four year normal program of high school course
- Must not have been academically ineligible as defined by the No Pass No Play rules for two or more six weeks during the current school year.
- Must meet the No Pass No Play rules by the date of tryouts
- Must have 90% attendance rate as of the end of the school day preceding tryout practice dates
- Must not have been discharged or resigned during the 2020-2021 school year.
- Must not have been placed in DAEP
- Must clear all previous balances one week before date of tryouts.
- Please refer to LHS Cheer Constitution for further detail.

### **Attire**

- At all times – Hair in pony tail, hair that is too short to be in a ponytail must be secured with bobby pins or small “flat” metal clips, absolutely no artificial nails or nail polish, and no jewelry.
- Practice – Athletic pants/shorts with a t-shirt, sports bra, and athletic tennis shoes.
- Tryouts – Black shorts with black tights/bloomers underneath, white sports bra, white t-shirt tucked in, and athletic tennis shoes with white socks.

## **Prior to Tryouts**

- All male candidates must meet the Lyford High School dress code policy related to hair.
- If any candidate violates one of the requirements set, candidate will be ineligible to proceed with tryouts.
- If a candidate is missing, that candidate will no longer be able to proceed with cheerleader tryouts, therefore becoming ineligible.

## **Cheerleading Tryouts**

- Upon arrival at Veterans Gymnasium, candidates will be placed at the activity center socially distanced and will remain in the designated location until completion of tryouts.
- All electronic devices will be confiscated prior entering the holding area.. Possession of any of these items may result in disqualification. Devices will be returned after dismissal.
- While in the holding room , candidates are prohibited from cheering, chanting or dancing. Candidates are expected to be respectful of all participants for the duration of tryouts.
- No candidate will be allowed to leave the holding area until tryouts are finished and they are dismissed by campus administrators.
- A campus administrator will have all candidates line up to draw numbers for the order of tryouts by classification. Once a candidate draws a number they will not be able to trade for another number. Each candidate will be given a “tag” with their designated number to be placed on the left side of their shirt.
- As soon as all candidates have numbers, tryouts will begin.
- Candidates will be called out in groups of three, in order of the numbers drawn. All candidates will wait in the lobby between the locker room and gym until instructed to enter the gym. At no time will any candidate or staff member interfere with the judging of another candidate (i.e. making noises, peering into the gym, etc.). Failure to comply will result in voiding the candidate’s scores.

- In cases which the numbers of candidates may require groups of 2 or 4, the highest numbers drawn will be grouped accordingly.
- Each candidate will individually enter the gymnasium and perform jumps, tumbling, cheer and chant before a panel of (3) impartial judges once instructed to begin by the judges.
- After each candidate has completed the individual component of their tryout, they will return to the lobby area.
- When the three candidates finish the individual part of the tryout, the three will enter the gymnasium and perform the dance portion of the tryout. (i.e. numbers 7,8,9 will enter the gym in such order, stand in front of the judges, in such order and perform the dance. Trading places will not be allowed). Upon completing the dance, candidates will walk back to the lobby area, the next set of candidates will be called out to complete the same process for the dance.
- When finished, the three candidates will walk back through the lobby area to the locker room.
- The next set of three candidates will be called to do the same, and the same procedures will follow until all candidates have participated in the tryout.

### **Dismissal from Tryouts**

- Once all scores have been verified by the LMS Campus Administrator, judges will be dismissed followed by candidates.
- At no time will candidates leave early from tryouts.

### **Visitors on Campus**

- At no time will any persons other than cheer sponsors and LMS campus administrators be allowed to enter the gymnasium.
- At no time will any persons other than LMS campus administrator be allowed to contact the judges.

### **Final Selection of Squad Members**

- The LMS campus administrator will verify scores for all candidates. After final scores are completed, campus administrators will post the numbers for the sixteen (16) cheerleaders, and mascot. (please refer to the 2021-2022 Cheerleading Constitution for “tie score” information)
- Any questions or requests related to the final outcome of squad members will be answered in the principal’s office on the school day following tryouts.
- After the tryouts, all visitors to campus as well as cheerleading candidates are asked to leave campus immediately.

### **Fittings and Payments**

- All selected members of the 2021-202 LMS Cheerleading Squad is reminded to turn in a deposit of \$175, to Mrs. Rangel on **Monday, March 26, 2021 by 4:15 pm.**
- A deposit receipt will be distributed to the members and be asked to give receipt to parent(s)/guardian(s) to be kept for records.

# Application for Cheerleader/Mascot Tryouts 2021-2022



My child, \_\_\_\_\_, has my permission to be a cheerleader/mascot at Lyford Middle School, if elected.

- I understand that he/she must abide by the rules and regulations set forth by the sponsor and campus administrators.
- I have read the rules and regulations and understand that violations of any of these rules may lead to temporary or permanent removal of my child from the squad.
- I understand that all forms included in the tryout packet must be completed and turned in to sponsor by Monday, February 22, 2021 or my child will not be allowed to tryout.
- I understand that my child must attend all practices (unless excused by the sponsor) for tryouts or my child will not be allowed to tryout.
- I understand that qualified impartial judges will evaluate my son/daughter and I agree to abide by the decision of the judges.
- I understand all costs involved, as stated in the constitution and on the payment schedule.
- I understand that by the very nature of the activity, cheerleading and gymnastics, a risk of physical injury no matter how careful the participants and the sponsor are is carried. Regardless of how many spotters are used, or what landing surface is used, the risk cannot be eliminated. The risk of injury includes but not limited to, minor injuries such as pulled muscles, sprains, and dislocated or broken bones. The risks also include catastrophic injuries such as permanent paralysis or even death.
- I understand these risks and will not hold Lyford Middle School, Lyford CISD, or any other personnel responsible in the case of an accident or injury at any time.

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

I am interested in becoming a cheerleader at Lyford High School. I understand the rules, regulations, and risks listed above. If elected, I agree to abide by the rules and regulations set forth by the sponsor and campus administrators. I also agree to cooperate and follow the instructions of the cheerleader sponsor and campus administrators.

\_\_\_\_\_  
Student Printed Name

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

# LMS CHEER

## Emergency Information Form

Candidate Full Name: \_\_\_\_\_

*In case of an accident and/or illness, please contact:*

**First Contact:**

Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Home Number: (\_\_\_\_\_) \_\_\_\_\_ Cell Number: (\_\_\_\_\_) \_\_\_\_\_

**Second Contact:**

Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Home Number: (\_\_\_\_\_) \_\_\_\_\_ Cell Number: (\_\_\_\_\_) \_\_\_\_\_

**Medical Information:**

Allergies: \_\_\_\_\_

Medication: \_\_\_\_\_

Additional Information: \_\_\_\_\_

**Physician Information:**

Family Physician: \_\_\_\_\_

Telephone: \_(\_\_\_\_\_) \_\_\_\_\_

**Insurance Information:**

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_



# LMS CHEER



## Member Insurance Form

We, the parents/guardians of \_\_\_\_\_ are in agreement to one of the following options for insurance coverage:

\_\_\_\_\_ We have hospitalization/medical insurance. This will cover my son/daughter during tryouts and during his/her term as a cheerleader/mascot, if elected.

\_\_\_\_\_ We do not have hospitalization/medical insurance. We will accept all responsibility for my son/daughter in case of an accident during his/her term as a cheerleader/mascot, if elected.

\_\_\_\_\_

Parent/Guardian Printed Name

\_\_\_\_\_

Parent/Guardian Signature

date \_\_\_\_\_



**LMS CHEER**

**ACKNOWLEDGMENT OF RISK, LIABILITY WAIVER AND CONSENT AND RELEASE  
AND EMERGENCY PERMISSION FORM**

As parent/legal guardian, I agree to allow my child to participate in interscholastic athletics.

The student and parent/legal guardian recognize that participation in interscholastic athletics involves some inherent risks for potentially severe injuries, including but not limited to death, serious neck, head and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal system, and serious injury or impairment to other aspects of the body, or effects to the general health and well being of the child. Because of these inherent risks, the student and parent/legal guardian recognize the importance of the student obeying the coaches' instructions regarding playing techniques, training and other team rules. By signing this form, the student and parent/legal guardian acknowledge that the student's participation is wholly voluntary and to having read and understood this provision.

The student and parent/legal guardian individually and on behalf of the student, hereby irrevocably, and unconditionally release, acquit, and forever discharge Lyford CISD and its coaches, administrators, attorneys, representatives, and employees from any and all losses, claims, demands, actions and causes of action, obligations, damages, and costs or expenses of any nature (including attorney's fees) that the student and/or parent/legal guardian incur or sustain to person, property or both, which arise out of, result from, occur during or are otherwise connected with the student's participation in interscholastic athletics.

The student and parent/legal guardian, individually and on behalf of this student, consent to the high school and their representatives to use and disclose the necessary personally identifiable information from the student's financial and health care information, to third parties including school representatives, coaches, athletic trainers, medical facilities, medical staffs, legal counsel and the media, for the purpose of receiving proper/necessary medical care, including making determinations regarding eligibility to participate in interscholastic athletics. The student and parent/legal guardian, individually and on behalf of this student, further release the high school and their representatives from any and all claims arising out of the use and disclosure of said necessary personally identifiable information, and agree to release to the high school, and their representatives, upon request, the detailed and completed application for financial aid.

The student and parent/legal guardian, individual and on behalf of the student, hereby consent to allow the student to receive medical treatment that may be deemed advisable by the high school and their representatives in the event of injury, accident or illness while participating in interscholastic athletics, including, but not limited to, transportation of the student to a medical facility.

\_\_\_\_\_

Parent/Guardian Printed Name

\_\_\_\_\_

Student Printed Name

\_\_\_\_\_

Parent/Guardian Signature

\_\_\_\_\_

Student Signature

Date \_\_\_\_\_

Date\_\_\_\_\_



**LMS CHEER**



***Receipt of 2021-2022 Cheer Constitution***

***I have fully read and understood the rules and regulations set by the cheerleading organization at Lyford High School. If my child is selected, I promise she/he will abide by the rules and regulations set forth by 2021-2022 Lyford Middle School Cheer Constitution. If at any time my child violates the any regulations set forth in the Cheer Constitution, I understand she/he risks dismissal from the squad.***

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

***I have fully read and understood the rules and regulations set by the cheerleading organization at Lyford Middle School. If selected, I promise to abide by the rules and regulations set forth by 2021-2022 Lyford MiddleSchool Cheer Constitution. If at any time I violate the any regulations set forth in the Cheer Constitution, I understand I risk dismissal from the squad.***

\_\_\_\_\_  
Student Printed Name

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

2021-2022



## Financial Agreement

I, \_\_\_\_\_, agree to accept my financial responsibility that may result from my membership on the team and I will pay any money that I owe at the time it is due. I agree to participate in all fundraising activities if the Cheer/Emerald Stars, including football program ads, posters, etc. I understand that I will be required to meet the fundraising quotas as set forth by the director(s), and the organization. Any deficient amount shall be paid upon demand.

Furthermore, should I fail to meet these financial obligations and responsibilities, I will be excluded from any special events or competition ( if applicable), or be required to resign from my Cheer/Emerald Stars position. Should I resign or be removed from Cheer/Emerald Stars, I will pay all monies due to the organization.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

I, \_\_\_\_\_, have read the financial agreement and understand that as parents, we/I share the financial obligations and responsibilities of our/my child's Cheer/Emerald Star membership.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

**Required, please fill out completely**

**Lyford Consolidated Independent School District  
 Parent and Student Agreement/Acknowledgement Form  
 For Participation in Student Random Drug Testing Program  
 Grades 7<sup>th</sup> – 12<sup>th</sup>  
 2020-2021**

\_\_\_\_\_

<b>Student's Name</b>	<b>Grade</b>	<b>Parent/Guardian Name</b>
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**Program Participation:**

<input type="checkbox"/> Athletics	<input type="checkbox"/> Academic UIL	<input type="checkbox"/> Band	<input type="checkbox"/> Cheerleading
<input type="checkbox"/> Dance	<input type="checkbox"/> FFA	<input type="checkbox"/> School Club	<input type="checkbox"/> Student Government
<input type="checkbox"/> Student Driver	<input type="checkbox"/> Other - Please specify: _____		

**Campus:**                       Lyford Middle School                       Lyford High School

**Prescription drugs my son/daughter is currently taking:**

Prescription Drug Currently Taking	Dosage
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**Student Acknowledgement and Agreement**

I understand the Student Random Drug Testing Program is a prerequisite to participating in extracurricular activities and driving a vehicle to school. I acknowledge that I have received a copy of the Lyford CISD policy that relates to the STUDENT RANDOM DRUG TESTING PROGRAM. I further acknowledge that I understand the provisions of the policy, and I hereby consent to any such testing as may be authorized by the District in accordance with said policy. I understand that because the tests are to be conducted on a random basis, I may be selected for testing more than once each year, and that refusal to submit to such tests may be grounds for discipline as specified in the policy.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian Certification and Acknowledgement**

I understand the Student Random Drug Testing Program is a prerequisite to participating in extracurricular activities and driving a vehicle to school. I acknowledge that I have received a copy of the Lyford CISD policy that relates to the STUDENT RANDOM DRUG TESTING PROGRAM, and I do hereby consent that my child may participate in any such testing as may be authorized by the District in accordance with said policy. I understand that I may withdraw the authorization for testing at any time upon submission of written notice to the school principal. I further understand and accept that, upon such withdrawal, my child will become ineligible to participate in any of the activities as may be specified in the policy until such time as authorization to test is restored.

Further, I hereby release and hold harmless the Lyford Consolidated Independent School District and the testing service, and their trustees, officers, employees, agents, and representatives from any and all liability, claims, damages, and costs that may arise as a result of any action as may be taken relative to a positive drug/alcohol test.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_