

Chilton Middle School
Cheer Squad
2018-2019
PERMISSION FORM

Participant Last Name	First Name	Middle	Grade (2018/2019)
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has permission to participate in the clinics and tryouts for the Chilton Middle School Cheer Squad on May 8-10, 2018.

I understand that there are grade and conduct requirements. Failure to maintain the requirements can result in temporary or permanent suspension from the squad.

Donations will be requested to cover the cost of the season, such as uniforms, shoes, camp, etc.

Fundraisers may offset the overall cost.

Participants **MUST** be covered by a **PRIVATE INSURANCE POLICY**. Everything possible to prevent injuries will be done.

If I am selected as a member of the Chilton Middle School Cheer Squad, my parents or guardians and I will agree to the above guidelines.

Parents or Guardian	Date
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Parents or Guardian	Date
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Home Phone	/ Cell Phone	Email Address
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YOU MUST SUBMIT THE FOLLOWING FORMS AND ITEMS TO CHEER ADVISOR Kim Ancker NO LATER THAN the first day of clinic. (You can drop them off at the Chilton office and have them put in the cheer mailbox.)

CHECKLIST: 6 pages (and a photo)

- _____ 1. Permission Form (this form)
- _____ 2. Cheerleader Application (including a recent 4x6 or 3x5 headshot)
- _____ 3. Inherent Risks of Cheerleading
- _____ 4. Constitution/Handbook Understanding
- _____ 5. After School Athletic Participation Clearance (2 pages)

Participants **will not** be allowed to participate in the clinics or tryout unless **all** paperwork has been turned in. Please submit forms in the order listed above.

CHILTON CHEERLEADER APPLICATION

2018-2019

Name: _____

Address: _____

Home Phone: _____

Current School: _____ Grade: _____

Birthdate: _____

Cheerleader's email _____ Cell# _____

Mother's Name: _____ Cell # _____

Contact Email: _____

Father's Name: _____ Cell # _____

Contact Email: _____

Do you play any other sports or engage in any other activities which may conflict with cheer practices or games (August through December)? If so, how do you see yourself balancing these responsibilities and cheerleading?

What do you believe is the role of a Chilton Middle School Cheerleader?

Why do you want to be a Chilton Middle School Cheerleader and what would you like to achieve out of this experience?

Do you have cheerleading experience? Yes or No. Please explain.

Do you have tumbling experience? What have you mastered and what are you working on?

*****Please attach a recent 4x6 or 3x5 headshot of yourself*****

PLEASE INITIAL AFTER EACH OF THE FOLLOWING STATEMENTS:

I know and understand the Chilton Middle School Handbook. _____

I am prepared to fulfill all obligations as a cheerleader for Chilton Middle School, should I make the squad. _____

I have asked any questions about things I do not understand. _____

I certify that all the information I have provided in this application/tryout packet is true and correct. If provided information is untrue, I understand that it may be grounds for my removal from tryouts or the squad. _____

INHERENT RISKS OF CHEERLEADING

Cheerleading is a sport and with any sport there is a risk of injury. Cheerleading is an anaerobic/aerobic activity that includes jumping, motions, and tumbling. Coaches should be informed of any injury or chronic conditions.

Although the probability of injury is minimized if you practice correctly, there is always the possibility of one occurring. Injuries that can occur in cheerleading include but are not limited to the following: blisters, muscle strains, ligament sprains, joint and muscle soreness, abrasions, contusions, stress fractures, broken bones, spinal cord injuries involving paralysis and even death. However, if you take certain precautions, the possibility of such injuries may be largely decreased.

Be sure to abide by the following:

1. Never tumble unless a coach is present.
2. Always practice in the presence of a qualified coach.
3. Always warm-up appropriately before cheering (practice and games) by jogging and stretching.
4. Always use mats tumbling during practice.
5. Always cheer in an area free from obstructions.
6. Report injuries to the coach/advisors as soon as they occur.
7. Follow all trainer and doctor recommendations.
8. Lift weights to increase strength and guard against injuries.
9. Always wear shoes and clothing appropriate for cheerleading.
10. Never wear jewelry of any kind or chew gum when cheering including practices and games.
11. Always have your hair pulled back from your face and shoulders.
12. Eat nutritious meals and get plenty of sleep.
13. Do not tumble when game is in process.
14. Take all activities seriously.
15. Understand that stunting is prohibited.

I have read the preceding warning. I thoroughly understand the assumptions of risks inherent in cheerleading participation. I acknowledge that I am physically fit and voluntarily participate in the activity of cheerleading.

PARENT _____ **CHEERLEADER** _____

DATE _____

Chilton Middle School

Cheerleading Constitution

Cheerleading is not a right. It is a responsibility - a responsibility to represent the school by your actions, attitudes, and behaviors to the rest of the community. Cheerleading is not a clique, a popularity contest, or an excuse for negative behavior. Cheerleading is an honor bestowed upon a selected group who will consistently maintain high standards. If anyone chosen is determined to fall short of not only the requirements of the cheerleading squad, but if they also fall short in their attitude or behavior then that student will lose their position on the squad. A cheerleader represents this school, themselves and their coaches/advisors. As your coaches, it is our job to lead the squad not only in learning skills appropriate for the sport of cheer but to coach and expect them to achieve high standards in academics, behavior, and showmanship. Cheerleading parents are held to the responsibility of helping their child fulfill the requirements of cheerleading in terms of grades, attendance and behavior.

Kim Ancker

Cheer Advisor/Coach

Chilton Middle School

***** I have read this document and the Chilton Handbook and understand the materials within the documents. I support the rules/regulations and consequences stated in this Cheerleading Constitution and will help my child uphold the behaviors and actions necessary to be a Chilton Cheerleader.**

Parent Signature: _____ Date: _____

Cheerleader's Signature: _____ Date: _____

CHILTON MIDDLE SCHOOL
AFTER SCHOOL ATHLETIC PARTICIPATION CLEARANCE FORM

Student Name

Activity

School Site

I hereby give my son/daughter permission to try out, practice and participate in the Roseville City School District After School Athletic Program.

I recognize that these activities may require strenuous physical exertion. I believe that my child is physically able to participate without damage to his/her health, and I release the Roseville City School District of any liability arising from any such physical activities.

I understand, acknowledge, and agree that the Roseville City School District, its employees, officers, agents, or volunteers, shall not be liable for any injury suffered by my son/daughter who is incident to and/or associated with the preparing for and/or participating in this activity.

In case of accident or other emergency if a parent/guardian cannot be reached, I hereby authorize a representative of the school to make such arrangements as he/she considers necessary for my child to receive medical or hospital care, including transportation. Under such circumstances, I further authorize the physician named below to undertake such care and treatment of my child, as he/she considers necessary. In the event that said doctor is not available, I authorize such care and treatment to be performed by any licensed physician or surgeon. The undersigned hereby agrees to bear all costs incurred as a result of the foregoing.

SPECIAL INSURANCE NOTICE

California Education Code 32221 requires that any student of any "educational institution" who participates in any athletic event **MUST BE INSURED FOR A MINIMUM OF \$1,500.00** covering the medical expenses of accident injuries. Students are not allowed to participate in athletic events until adequate insurance is in force, which meets the requirements of this law.

The information you fill out on the reverse side indicates that your family coverage will meet the requirements of the law.

STUDENT'S NAME

Last	First	Middle	Birth Date	Grade	Sex
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Address (Street/ P.O. Box)	City	Zip	Home Phone
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Father's Name	Father's Employer Work	Phone
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Mother's Name	Mother's Employer Work	Phone
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Name of Family Physician or Medial Advisor	Phone
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Name of Health Plan	Group or Policy #	Phone
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EMERGENCY CONTACTS - Persons who may act for parents when parents cannot be reached:

Name/Address	Phone
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Name/Address	Phone
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Medical Information:

*Does your child have any conditions/allergies/health problems, which could require emergency medical care? If so, please explain below:

*Is your child on any regular medication? If so, list below:

PLEASE NOTE THAT PARTICIPATION WILL NOT BE ALLOWED UNTIL ADEQUATE COVERAGE IS PROVIDED. IF YOUR INSURANCE CHANGES OR IS DISCONTINUED, IT IS YOUR RESPONSIBILITY TO NOTIFY THE SCHOOL IMMEDIATELY. I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS FORM AND UNDERSTAND AND AGREE TO ITS TERMS:

Parent/Guardian Signature	Date
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Student Signature	Date
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