

REINVERS

PERSONAL INFORMATION

NAME: _____
HEIGHT: _____ WEIGHT: _____ AGE: _____ DATE OF BIRTH: _____
MOTHER'S NAME: _____ FATHER'S NAME: _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
HOME PHONE: (_____) _____ MOBILE PHONE: (_____) _____
EMAIL ADDRESS: _____

EDUCATION INFORMATION

HIGH SCHOOL: _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
SCHOOL PHONE: (_____) _____ GRADUATION DATE: _____
I HAVE TAKEN (CIRCLE ALL THAT APPLY) : ACT SAT COMPASS NONE
ACT: COMPOSITE SCORE: _____
SAT: BEST VERBAL: _____ BEST MATH: _____
HIGH SCHOOL GPA: _____ HIGH SCHOOL CLASS RANK: _____

CHEERLEADING INFORMATION

VARSITY SCHEERLEADING COACH: _____
COACH'S PHONE NUMBER: (_____) _____
ALL-STAR GYM: _____
ALL-STAR CHEERLEADING COACH: _____
COACHES PHONE NUMBER: (_____) _____
NUMBER OF YEARS TUMBLING/GYMNASTICS: _____
WHAT LEVEL OF TUMBLING/GYMNASTICS DID YOU COMPLETE: _____

STANDING SKILLS	YES/NO	RUNNING SKILLS	YES/NO
BACK HANDSPRING (BHS)	_____	BHS	_____
2 BHS	_____	2 BHS	_____
TUCK	_____	TUCK	_____
BHS TUCK	_____	BHS TUCK	_____
2 BHS TUCK	_____	BHS LAY	_____
2 BHS FULL	_____	BHS FULL	_____
BHS FULL	_____	OTHER: _____	
STANDING FULL	_____	OTHER: _____	

STUNTS: (LIST HARDEST SKILLS YOU HAVE MASTERED)

MOUNTS (TOSS STUNT/QUICK TOSS, ECT.) _____

FULL-UPS :YES/NO

FLIPPING STUNTS: YES/NO

DISMOUNTS: (FULL DOWN/DOUBLE DOWN, ECT.) _____

****PLEASE BRING A CURRENT PHOTO****

****PLEASE WEAR BLUE, BLACK, OR WHITE CLOTHES FOR TRY-OUTS****

****NO JEWELRY****