

Male / Female

(Circle Squad trying out for): Cheerleading Tiger Girls Mascot

# LSU SPIRIT SQUAD TRYOUT APPLICATION

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_ (print clearly)

High School \_\_\_\_\_ Class of \_\_\_\_\_ GPA \_\_\_\_\_

College \_\_\_\_\_ Major \_\_\_\_\_ How many years in college? \_\_\_\_\_

How many years left in college? \_\_\_\_\_ Current # of hrs enrolled? \_\_\_\_\_ Cumulative GPA \_\_\_\_\_

Cheerleading/Dance Team/Mascot Experience \_\_\_\_\_

Other Interests \_\_\_\_\_

Honors or Awards \_\_\_\_\_

For safety and athletic training purposes, please list any prior orthopedic injuries, with dates of injury, and any unusual physical conditions that our staff should be aware of:

\_\_\_\_\_  
\_\_\_\_\_

The undersigned is aware of and acknowledges the risks associated with the participation in cheerleading/dancing/mascoting activities, including but not without limitation, the risk of catastrophic injury, paralysis and even death. Nevertheless, it is the undersigned's desire to participate in clinics and to try out for the LSU Spirit Squads at Louisiana State University. The undersigned assumes all risk of injury associated with said clinic and tryouts, and specifically agrees to indemnify and hold free and harmless Louisiana State University, its agents and employees, including without limitation the LSU cheerlead, Tiger Girls, mascots, staff, coach, spirit director, and all other members of the Department of Athletics staff, from any and all claims or causes of action arising out of his/her participation in said clinic and tryouts, no matter what the cause. The undersigned further acknowledges and certifies that he/she is at least 18 years of age.

Signature \_\_\_\_\_ Date \_\_\_\_\_

If under age 18, this form MUST be signed by a parent or guardian prior to participation.

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

Application Check list: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If an LSU Student; copy of class schedule and GPA Audit  
If a transfer student or incoming freshman; copy of acceptance letter to LSU  
All applicants; copy of insurance card front and back