



2015-2016 GEORGIA STATE UNIVERSITY SPIRIT PROGRAM

TRYOUT/AUDITION APPLICATION

(PLEASE PRINT YOUR INFORMATION LEGIBLY)

NAME _____ GENDER (CIRCLE ONE) M F

CELL NUMBER _____ EMAIL ADDRESS _____

HOME ADDRESS _____

AGE _____ DATE OF BIRTH _____

SCHOOL CURRENTLY ATTENDING _____

GRADE OR CLASSIFICATION IN FALL 2015 (CIRCLE ONE) FR SOPHO JUN SEN

GSU PANTHER ID # (If currently on campus.) _____

TEAM THAT YOU ARE INTERESTED IN? (Please circle all that apply.)

ALL GIRL CHEER CO ED CHEER PANTHERETTES DANCE TEAM TEAM POUNCE

CHEER POSITION: CIRCLE ALL THAT APPLY.

ALL GIRL SIDE BASE ALL GIRL BACK BASE ALL GIRL TOP

COED MALE COED TOP GIRL

T SHIRT SIZE _____ SHORTS _____ NIKE SHOE _____

WAIVER OF RESPONSIBILITY

I _____, will be participating in the Georgia State University Cheer/Dance team tryouts, and I understand that while participating in this event, I will hold harmless the Georgia State Athletics department, Athletic Association, it's staff, and any other participants in the event of injury or accidental death, theft of property, or harm while participating in the event.

SIGNATURE OF THE PARTICIPANT _____

PARENT OR GUARDIAN (If participant is under 18) _____

DATE _____

*A face shot photo, your acceptance letter or pending letter, a copy of your personal insurance card, and \$20 cash should be included with this form at tryout registration day.