

NOVA SOUTHEASTERN UNIVERSITY CHEERLEADER TRY-OUT PRE-REGISTRATION FORM

PERSONAL INFORMATION

Name: _____

Address: _____

City: _____ State : _____ Zip: _____

Home phone #: (____) _____ Email : _____

Mother's name: _____

Father's name: _____

Height: _____ Skirt size _____ Shell/Top size _____ Shoe size _____

Injuries: _____

ACADEMIC INFORMATION

Current High School/College/University: _____

School Address: _____

City: _____ State : _____ Zip: _____

High School Graduation year: _____

GPA _____ Hours Passed _____ SAT Score _____ ACT Score _____

Academic Honors: _____

Interest level with NSU: ___will attend ___very interested ___slightly interested ___not sure

Other Colleges you are interested in and why

- 1) _____
- 2) _____
- 3) _____

Potential college major:

- 1) _____
- 2) _____

People you know at NSU: (faculty, staff, alumni, athletes, students, etc.)

CHEERLEADING INFORMATION

Current cheerleading team(s): _____

Coach's name: _____

Coach's Phone #: (____) _____

Coach's Email: _____

if you are on multiple teams please list all that apply

Position: _____ Flyer _____ Base _____ Back Spot

Describe the ability level of your above skills: _____

Tumbling: Describe all tumbling skills that you have. _____

Anything else you would like me to know about you: _____

Form must be submitted prior to try-outs:

CA Tolchinsky

FAX – 954-262-3926

Email: NSUCheerCoach@aol.com