

Greetings,

Now that your high school cheerleading career is drawing to a close, it is time to move on to the next level. I would like to invite you to attend our try-outs to be held on Friday, April 4<sup>th</sup> and Saturday the 5<sup>th</sup>. The try-outs will take place in the Old National Guard Armory, also known as the Judo Gym or the Women's Wrestling Gym and Cheerleading Gym. (Directions Enclosed) Also enclosed is the itinerary and a medical release from that should be completely filled out upon arrival on Friday.

**YOU WILL NOT BE ALLOWED TO TRY-OUT WITHOUT THIS MEDICAL RELEASE FORM FILLED OUT**

I realize that this is something new to you and that you may have a few questions. I hope that the following points will help you, if not, do not hesitate to give me a call.

- You should wear clothes that are comfortable and presentable for the try-outs. Remember, you are always being judged.
- If your parents are going to join you at the try-outs and need a hotel, here is a list of hotels and phone numbers for Williamsburg:
  - Cumberland Inn (606) 539-4100
  - Super 8 Motel (606) 549-3450
  - Williamsburg Motel (606) 549-2300
- If you need a place to stay then let me know and I can arrange for you to stay in one of the dorms. Please let me know ASAP.
- If for some reason you cannot attend the try-out, then you can submit a videotape of yourself. This video is due by the 4<sup>th</sup> of April (address is at the top of the page). This video should include:
  - Introduction of yourself
  - A brief background of your cheerleading experience
  - One sideline
  - All Partner Stunts you are able to do
  - All Gymnastics you are able to do

Any questions that may not have been answered please give me a call. I hope to see you on the 4<sup>th</sup>.

Beth Wooley  
Head Cheerleading Coach  
Cell: (865) 773-3131  
E-mail: [bwooley@ucumberlands.edu](mailto:bwooley@ucumberlands.edu)

Cheerleading Office  
(606)539-4262  
[cheer@ucumberlands.edu](mailto:cheer@ucumberlands.edu)

**University of the Cumberland**  
**Cheerleading Try-outs**  
**April 4<sup>th</sup> and 5<sup>th</sup>**

**FRIDAY, APR. 4<sup>th</sup>**

5:30 to 6:30 pm – Armory – Cheerleading and Women’s Wrestling Gym

- Registration
  - o Complete all of your paperwork
  - o Get fitted for uniforms
  - o Stretch and warm-up

6:30 to 7:30 pm

- o Learn two (2) Sidelines
- o Learn a dance (Girls)
- o Learn another sideline (Guys)

7:30 to 9:00 pm

- o Learn or work on partner stunts
- o Learn or work on gymnastics

**SATURDAY, APR. 5<sup>th</sup>**

9:00 to 10:30 am – Armory – Cheerleading and Women’s Wrestling Gym

- Warm-up
- Review
  - o Sidelines
  - o Dance
  - o Partner Stunts
  - o Gymnastics

10:30 to ???

- Individual Try-outs

Immediately following will be the posting of the 2008-2009 Cheerleading Squad and a short meeting.

**DIRECTIONS**

The Old Armory building is located on Ridge Street. From I-75 S turn left; from I-75 N turn right off the exit on Highway 92. At the first light, turn left on South 10th Street. After passing the Cumberland Inn on the left, turn right on South 2nd Street. The street will take a sharp turn to the left, then will veer right at the railroad tracks. After the railroad tracks, the building will be on the left. It is a large gray-brick building across from the Whitley County Little League baseball field.

**University of the Cumberland's Athletic Try-out Medical Release Authorization  
for Non-Students with Acknowledgment of Risk and Insurance Coverage**

I, \_\_\_\_\_, age \_\_\_\_\_, while participating in the Intercollegiate Athletic Try-out for the \_\_\_\_\_ (Sport) program at the University of the Cumberland's, hereby consent to be treated or extended emergency medical care by the Athletic Trainer's Staff or any other medical personnel recommended by the Team Physician or Athletic Trainer in the event that I become injured.

I have decided to officially try-out for the sport listed above. I understand that I am potentially placing myself in a situation where I might sustain severe bodily harm or injury. I will hold the University of the Cumberland's harmless for any accident that I might befall me as a result of participating in this athletic try-out.

I confirm that I am not currently enrolled as a student at the University of the Cumberland's, and I understand that I must show proof of medical insurance coverage prior to my try-out. In the event I become injured during my try-out, I understand that my personal insurance will be the only source of medical bill coverage available to me since I am not a full-time student at this institution. I understand if I do not have any medical insurance I will be fully responsible for all medical bills incurred.

Date: \_\_\_\_\_

Participant's Name Printed: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

Guardian's Signature: \_\_\_\_\_

(Only if under 18 years of age)

Name of Primary Insurance Company: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

Contact's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone #: (     ) \_\_\_\_\_

Cell Phone #: (     ) \_\_\_\_\_