

CHEER ATHLETE EVALUATION FORM

Please circle the evaluation date you will attend:

May 13 14 15 16

Athlete Name

Age

____/____/____
Date of Birth

(____) ____ - ____
Athlete Phone #

Gym/Program in '23 - '24

Team & Level in '23 - '24

Years in All Star

1. _____ 2. _____ 3. _____
Division & Level Goal for the 2024-2025 Season

Other Requests (long distance ride shares, conflict with practice nights, etc.) _____

**** These requests will be considered but no guarantees are made. We will do our best to accommodate specific requests for ride sharing/siblings/practice times etc. that are realistic and significant. Requesting to fly, to be on an older team, or to be on a team with higher-level skills than the ones you currently have are unlikely to make an impact on the final roster selection.**

If you have been on a team before, what role(s) did you play in stunt groups? (Check all that apply)

MAIN SIDE BACK FLYER FRONT

What is the HIGHEST level of stunts you have competed? (mark one) 1 2 3 4 5 6/7

Are you interested in being a double-teamer for an additional fee? _____

Please put a check mark **IN THE CIRCLES ONLY** for skills you can currently complete safely, consistently, with good technique, and **WITHOUT A SPOTTER**.

↓ **BEGINNER**

INTERMEDIATE

ADVANCED

ELITE

LEVEL 1
LEVEL 2
LEVEL 3
LEVEL 4
LEVEL 5

<input type="checkbox"/> Forward Roll	<input type="checkbox"/> Handstand Forward Roll	<input type="checkbox"/> BWO Switch	<input type="checkbox"/> FWO CW BWO Switch
<input type="checkbox"/> Backward Roll	<input type="checkbox"/> Back Walkover (BWO)	<input type="checkbox"/> 3 BWO	<input type="checkbox"/> Back Extension Roll
<input type="checkbox"/> Bridge Kick Over	<input type="checkbox"/> Front Walkover (FWO)	<input type="checkbox"/> 3 FWO	<input type="checkbox"/> Valdez BWO Switch
<input type="checkbox"/> Cartwheel	<input type="checkbox"/> Round Off (RO)	<input type="checkbox"/> Valdez	<input type="checkbox"/> *Back Handspring (BHS) & RO BHS
<input type="checkbox"/> BHS & BHS Step Out (SO)	<input type="checkbox"/> BWO BHS	<input type="checkbox"/> Valdez BHS	<input type="checkbox"/> Back Extension Roll BHS
<input type="checkbox"/> RO BHS/RO BHS SO	<input type="checkbox"/> RO 3 BHS	<input type="checkbox"/> RO BHS Rebound 1/2 RO BHS	<input type="checkbox"/> BHS SO BWO BHS
<input type="checkbox"/> RO 2 BHS	<input type="checkbox"/> RO BHS SO BHS	<input type="checkbox"/> FWO RO 3 BHS	<input type="checkbox"/> FHS Front Bounder SO RO BHS
<input type="checkbox"/> Dive Roll	<input type="checkbox"/> Front Handspring (FHS)	<input type="checkbox"/> Front Bounder	<input type="checkbox"/> RO Back Tuck (BT) & 2 BHS
<input type="checkbox"/> RO BT	<input type="checkbox"/> FWO RO BHS BT	<input type="checkbox"/> Aerial	<input type="checkbox"/> Aerial (Pause) RO BHS BT
<input type="checkbox"/> RO BHS BT	<input type="checkbox"/> RO 2 BHS BT	<input type="checkbox"/> Front Bounder RO BHS BT	<input type="checkbox"/> FT (Pause) RO BHS BT
<input type="checkbox"/> Jump BHS	<input type="checkbox"/> BHS Jump BHS	<input type="checkbox"/> Jump BHS Jump BHS	<input type="checkbox"/> FWO RO BHS SO RO BHS BT
<input type="checkbox"/> 2 BHS	<input type="checkbox"/> 3 BHS	<input type="checkbox"/> Front Tuck (FT)	<input type="checkbox"/> RO BHS Layout (LO) & 2 BHS BT
<input type="checkbox"/> 2 BHS BT	<input type="checkbox"/> BHS BT	<input type="checkbox"/> Jump BHS BT	<input type="checkbox"/> Aerial BT
<input type="checkbox"/> Cartwheel BT	<input type="checkbox"/> FWO RO BHS LO	<input type="checkbox"/> FT SO RO BHS LO	<input type="checkbox"/> FHS FT SO RO BHS LO
<input type="checkbox"/> Standing BT	<input type="checkbox"/> RO BT 1-2 BHS LO	<input type="checkbox"/> RO Whip 1-2 BHS LO	<input type="checkbox"/> RO Whip LO
<input type="checkbox"/> RO BHS LO	<input type="checkbox"/> RO Whip 1-2 BHS BT	<input type="checkbox"/> RO Whip BT	<input type="checkbox"/> RO BHS Full & 2-3 BHS LO
<input type="checkbox"/> Jump BT	<input type="checkbox"/> BHS LO	<input type="checkbox"/> Jump BHS LO	<input type="checkbox"/> 1-2 BHS Whip LO
<input type="checkbox"/> 2-3 BHS LO	<input type="checkbox"/> BHS BT 1-2 BHS LO	<input type="checkbox"/> BHS Whip BHS LO	<input type="checkbox"/> RO Whip 1-2 BHS Full
<input type="checkbox"/> RO Full	<input type="checkbox"/> FWO RO BHS Full	<input type="checkbox"/> BT 1-2 BHS LO	<input type="checkbox"/> FHS FT SO RO BHS Full
<input type="checkbox"/> RO BHS Full	<input type="checkbox"/> RO 2-3 BHS Full	<input type="checkbox"/> FT SO RO BHS Full	<input type="checkbox"/> RO Arabian (Pause) RO BHS Full