Dance Tryout Application (please print clearly)	Circle One:	Fall	Spring	Both	
Student Name:Student Phone #:	Students Pare Parent Phone	nt: #:			
2024-2025 Grade Level:					
Are you currently being treated for injuries? If so,	please list:				
Are you a member of any club, organization, or tealist:	m requiring ex	tra prac	tice time	? If so, please	
List any honors you have received in school:					
What are the dates that you will be out of town during the summer for practicing/fundraisers?					
Please list any other obligations that may interfere during June & July or any other times you may be	_		-	uring (at home)	

Parental Permission Slip

has my team at Labette County High School. to my child and the Dance constitution to see that these rules and regulations failure to follow these rules and regulations dismissal from the team. I will, when dance coach for clarification of the my child to be a good dancer at LCHS are be proud to have as a representative of	on. I will, so far as I am able, assist are carried out. I understand that ations could mean suspension or never a question arises, contact the atter. I will also encourage my and a leader that the high school will
I also understand that there are certain fulfill if my child qualifies for the teal shoes, outfits and other items used by my child is selected, I will see that the summer day camp, and all practice see as well as participate in all fundraising	m. This includes paying for the my child throughout the year. If ey get a physical exam and attend essions unless excused by the coach,
Parent Signature	Date

Labette County High School Dance Tryout Agreement

I understand that as a member of the Labette County High School Dance team for the school year 2024-2025, I will have many important duties which I will faithfully execute. I understand that as a dancer I constantly set an example for other dancers, the student body, the community and I will maintain a good example for these people. I will maintain a friendly, respectful working relationship with the fellow dancers and the coach. I will do everything in my power to maintain a high level of total school spirit.

I also understand that I am required to stay at practices until finished. This means I will communicate with my coach if there is a reason to be gone, such as work. We will work with you and your work schedule. Dance is one of my highest priorities and responsibilities. I realize that just because I was a dancer last year, it does not mean that I am guaranteed the same position in 2024-2025.

I have read the Dance Team Constitution and the tryout requirements and I am willing to follow them. Any questions I may have regarding rule interpretations have been asked. Participating in athletics means a person is willing to pay the price by being above the average as to leadership and training. Persons who feel they cannot abide should not sign this agreement.

Dancer's Signature _	 	 	
Date			

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I agree and fully understand the demerit/merit agree to ask the coach any questions about the this agreement.	
Dancer Signature	Date
Parent Signature	Date

Demerit/Merit Agreement Signature