2018 - 2019 Tryout Requirements
University of South Dakota Dance Team
Sunday, September 9, 2018 – 5:00 PM

Student Requirements

- Freshman/Transfer Students
  - Must be Accepted to USD for 2018-2019 academic year
  - Apply for Admissions Here

- Current USD students:
  - Enrolled full time (Undergraduate: 12 hours, Graduate: 9 hours)
  - Cumulative & Current GPA of 2.0 or above

- Current Health Insurance (a copy of insurance card must be presented at tryout check-in)
- Filled out a tryout application and all USD Waivers.

Female Tryout Attire – Game Day Ready

- Black Spandex Shorts
- Solid Black Fitted Top or Sports Bra (small logos are acceptable)
- Dance Shoes

Male Tryout Attire – Game Day Ready

- Black Shorts
- Solid Black Top (small logos are acceptable)
- Dance Shoes

Technical Skills and Requirements:

Technical skills are a large part of competitive and sideline dance. The following skills will be asked of you during the tryout process. Note, we may ask you to perform a skill even if it is not listed:

<table>
<thead>
<tr>
<th>Required Skills</th>
<th>Bonus Skills</th>
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</thead>
<tbody>
<tr>
<td>- Split Leap</td>
<td>- Ring Leap</td>
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<tr>
<td>- Side Leap</td>
<td>- Switch Leap</td>
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<tr>
<td>- Calypso</td>
<td>- Turning Disc</td>
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<tr>
<td>- Tilt Jump</td>
<td>- Leg Hold Turn</td>
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<tr>
<td>- Toe Touch</td>
<td>- Tumbling Skills</td>
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<tr>
<td>- A La Secondes</td>
<td>- Hip Hop Skills</td>
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<tr>
<td>- Pirouettes</td>
<td>- Other High Level Technical Skill</td>
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</tbody>
</table>

Tryout Format & Skill Sections:

Please note that the tryout schedule and set up is subject to change by the coaching staff and may be changed based on the number of people trying out and the skill level of those trying out.

Registration – Monday, September 9 – 5:00-5:30pm

- All Participants will need to register and warm up during this time.

Preliminary Session – 5:30pm – 7:30pm

- This section will involve a technique demonstration and will involve teaching all three sections of the tryout dance (pom, jazz, and hip hop.) Please use the time wisely here if there are any skills that you wish to show in your personal tryout. The list of skills that will be helpful in your tryout will be provided to you.

Tryout Session – 7:30pm – 8:00pm
RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF THE RISK AND
INDEMNITY AGREEMENT AND CONSENT TO MEDICAL TREATMENT

By my signature below, I acknowledge that I am aware of, appreciate the character of, and voluntarily assume the risks involved in participating in: Dance for the University of South Dakota.

By my signature below, on behalf of myself, my heirs, next of kin, successors in interest, assigns, personal representatives, and agents, I hereby:

1. Waive any claim or cause of action against and release from liability the State of South Dakota, its officers, employees, and agents for any liability for injuries to my person or property resulting from my participation in the activity listed above;

2. Agree to indemnify and hold harmless the State of South Dakota, its officers, employees, and agents for any claims, causes of action, or liability to any other person arising from my participation in the activity listed above; and

3. Consent to receive any medical treatment deemed advisable during my participation in the activity listed above.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF THE RISK AND INDEMNITY AGREEMENT AND CONSENT TO MEDICAL TREATMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Name ________________________________ Date of Birth _____________________
Signature ______________________________ Address________________________
Date____________________________________

If the participant is a minor, the following must be completed:

Guardian’s Name____________________________ Date of Birth________________________
Signature _________________________________ Address ______________________
Date____________________________________
2018-19 USD Dance Team Tryout Application

First Name: _______________________     Last Name: ________________________________________

Nickname(s): __________________________________________________________________________

Address: ________________________________________________________________

City: ___________________________     State: _________   Zip Code: _____________________

Email Address: _________________________________    Cell Phone Number: _____________________

Gender (Circle one):    Male         Female             Date of Birth: __________________________

Athlete Sizes:
T-shirt Size: ________ Short Size: ________ Shoe Size: ________ Tank Top Size: ________

Female Athletes Only Sizes:
Spandex Size: _________ Crop Top Size: ________ Yoga Pant/Legging Size: ________

Academic Information:
Grade in College: ________________ Major/Minor: ________________________________________

School Attended Last Year: __________________________________________ GPA: ________

If under the age of 18, please fill in the below information about your Parent/Guardian:

Parent/Guardian Name: _________________________________    Phone Number: _________________

Address: ____________________________________________________________________________

City: ___________________________     State: __________    Zip Code: _____________________

Email Address: __________________________________________    Relation to Athlete: ____________

Dance Information:
What school/studio(s) did you dance with? __________________________________________________

How many hours per week do you spend in the studio/practicing? __________

How many years have you been dancing? __________

How many years have you been competing in dance? __________

Preferred Styles: _______________________________________________________________________

Were you a Captain last year:          YES   NO

Are you available for USD Work Week July 23rd-27th?       YES   NO

Are you available for NDA Camp at Northwest Missouri State July 29th-31st?     YES   NO

***Please use the back of this sheet to include any relevant dance experience or related experience that you wish the coaching staff and captains to know about***
Dance Team Tryout Result Acceptance Form

I, ___________________________ (Participant Name), do hereby agree to accept the results of the University of South Dakota Dance Team Tryouts for the Spring of ________. I agree that the decisions made by the judges and coaches of the University of South Dakota Dance program are subject to change at any time and I will abide by those changes if they occur.

The judges and coaches of the University of South Dakota Dance program work hard to ensure a fair and equal tryout based on the skills level and attitude of those participating in the tryout. This entire process takes place in one day and you may not agree with the selections made. The program does the best they can to select people who they believe will work the best for the program. You are free to contact the coaching staff after tryouts and ask what you can do better at the next tryout. Coaches here are always willing to assist and will give honest responses on what you can work on for next time.

By signing below, I agree to the above statement and will not challenge the tryout process after tryouts have been concluded. I also will accept the decision of the coaching staff with regard to team selection.

I have read the above statements and agree:

Name: ____________________________________________
Signature: _________________________________________
Date: ______________________

If the participant is a minor, the following must be completed:

Parent/Guardian’s Name: ______________________________________
Signature: __________________________________________________
Date: ______________________