

HALFTIME SCHOOL SHOW TWIRL TEAM



Place

	Weak 0-10	Low Fair 11	Fair 12	High Fair 13	Low Avg 14	Avg 15	Good 16	Very Good 17	Exc. 18	Sup. 19	SCORE																																																																																																																																											
ROUTINE CONTENT 20	VARIETY / DIFFICULTY / CREATIVITY FLOW OF MOVEMENTS ENTERTAINMENT VALUE MUSICAL EXPRESSION THROUGH USE OF MOVEMENT / BODYWORK MUSICAL EXPRESSION THROUGH USE OF EQUIPMENT / PROPS																																																																																																																																																					
TEAMWORK 20	VARIETY / DIFFICULTY / CREATIVITY Partner Segments Group Segments ENTERTAINMENT VALUE					TEAM MEMBER RESPONSIBILITIES Unison Alignment/Spacing Rhythm / Timing Definition in Equipment Definition in Movement / Bodywork																																																																																																																																																
PRODUCTION (CHOREOGRAPHY) 20	ENTRANCE & EXIT CHANGING OF FLOOR PATTERNS FLOOR COVERAGE CONTINUITY OF ROUTINE CREATIVITY OF ROUTINE TRANSITIONS ARTISTIC EXPLANATION OF MUSIC					MUSICAL INTERPRETATION Change of Pace Audience Appeal Dynamic Effects MUSICAL SELECTION Theme / Age Appropriate QUALITY OF MUSIC																																																																																																																																																
TECHNIQUE & QUALITY OF PERFORMANCE 20	EQUIPMENT Uniformity of Style Technical Skills Precision / Control Perfection Performance Energy Performance Effectiveness					MOVEMENT / BODYWORK Uniformity in Style Uniformity of Body, Arms, Legs Extension / Posture Poise & Grace Perfection / Control Performance Effectiveness																																																																																																																																																
APPEARANCE SHOWMANSHIP PRESENTATION 20	COSTUME & ACCESSORIES Suitable for Theme / Music Style Fit PERSONAL GROOMING HAIR, MAKE-UP FOOTWEAR					CHARACTER INTERPRETATION / EXPRESSION PERFORMANCE EMOTION PROJECTION EYE CONTACT CONFIDENCE / ATTITUDE PROFESSIONALISM																																																																																																																																																
PENALTIES TIME	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td> <td style="width: 10%;">0.5</td><td>1.0</td><td>1.5</td><td>2.0</td><td>2.5</td><td>3.0</td><td>3.5</td><td>4.0</td><td>4.5</td><td>5.0</td><td>5.5</td><td>6.0</td> </tr> <tr> <td>Drops/2 Hand</td> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> <tr> <td>Fall</td> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> <tr> <td>Out of Step</td> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> <tr> <td></td> <td>0.1</td><td>0.2</td><td>0.3</td><td>0.4</td><td>0.5</td><td>0.6</td><td>0.7</td><td>0.8</td><td>0.9</td><td>1.0</td><td>1.1</td><td>1.2</td> </tr> <tr> <td>Break</td> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> <tr> <td>Off Pattern</td> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> <tr> <td>Unison</td> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> </table>												0.5	1.0	1.5	2.0	2.5	3.0	3.5	4.0	4.5	5.0	5.5	6.0	Drops/2 Hand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Out of Step	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		0.1	0.2	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1.0	1.1	1.2	Break	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Off Pattern	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unison	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table style="width: 100%; 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see back of sheet
for personal comments

Clerk's Initials

Judge's Signature