
Skipper's Name

Long Rope

Entrances and Exits

Enter Under Turner's Legs	<input type="checkbox"/>	Successful Completion of the Skill	<input type="checkbox"/>	Masterful Completion of the Skill
Enter 180 Turn, Left x 4	<input type="checkbox"/>		<input type="checkbox"/>	
Enter 180 Turn, Right x 4	<input type="checkbox"/>		<input type="checkbox"/>	
Exit 180 Turn, Left x 4	<input type="checkbox"/>		<input type="checkbox"/>	
Exit 180 Turn, Right x 4	<input type="checkbox"/>		<input type="checkbox"/>	
Exit Under Turner's Legs	<input type="checkbox"/>		<input type="checkbox"/>	

Turning Skills (Repeat for each hand)

Clean Start, Forward x 4	<input type="checkbox"/>	<input type="checkbox"/>
Clean Start, Backward x 4	<input type="checkbox"/>	<input type="checkbox"/>
Complete All Level 1 Skills with a Jumper	<input type="checkbox"/>	<input type="checkbox"/>

Partner Skills

2-in-1, One Turner x 4	<input type="checkbox"/>	<input type="checkbox"/>
2-in-1, Two Turners x 4	<input type="checkbox"/>	<input type="checkbox"/>
Jump into 2-in-1 x 4	<input type="checkbox"/>	<input type="checkbox"/>
Twins x 4	<input type="checkbox"/>	<input type="checkbox"/>

Jumping Skills

Double Bounce x 16	<input type="checkbox"/>	Successful Completion of the Skill	<input type="checkbox"/>	Masterful Completion of the Skill
Single Bounce x 16	<input type="checkbox"/>		<input type="checkbox"/>	
Spin in a Circle, Left x 4	<input type="checkbox"/>		<input type="checkbox"/>	
Spin in a Circle, Right x 4	<input type="checkbox"/>		<input type="checkbox"/>	
1 Foot Jump, Left x 4	<input type="checkbox"/>		<input type="checkbox"/>	
1 Foot Jump, Right x 4	<input type="checkbox"/>		<input type="checkbox"/>	
Alternating Step x 8	<input type="checkbox"/>		<input type="checkbox"/>	
Heel Tap, Left x 4	<input type="checkbox"/>		<input type="checkbox"/>	
Heel Tap, Right x 4	<input type="checkbox"/>		<input type="checkbox"/>	
High Knee, Left x 4	<input type="checkbox"/>		<input type="checkbox"/>	
High Knee, Right x 4	<input type="checkbox"/>		<input type="checkbox"/>	
Straight Kick, Left x 4	<input type="checkbox"/>		<input type="checkbox"/>	
Straight Kick, Right x 4	<input type="checkbox"/>		<input type="checkbox"/>	
Jumping Jacks x 4	<input type="checkbox"/>		<input type="checkbox"/>	
Touch the Floor x 4	<input type="checkbox"/>		<input type="checkbox"/>	

Coach's Signature

Date

