

# Cheerleading Technique Camps

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## PARTICIPANT RELEASE AND WAIVER FORM

Every Participant must have a completed and signed release form to turn in at registration on the first day of camp in order to participate.

PLEASE PRINT

MINOR'S NAME		NAME OF PARENT / LEGAL GUARDIAN	
ADDRESS		SCHOOL NAME	
CITY	STATE	ZIP	SCHOOL ADDRESS
PHONE		SCHOOL CITY	STATE ZIP
EMAIL ADDRESS		SCHOOL PHONE	
LOCATION WHERE YOU WILL ATTEND CAMP IF DIFFERENT FROM SCHOOL ADDRESS		CAMP DATES	SQUAD TYPE (Varsity, JV, Senior AS, Junior AS, etc.)
THE FOLLOWING INFORMATION PROVIDED TO EMERGENCY MEDICAL CARE PERSONNEL ONLY (SHOULD THE NEED ARISE)			
HEALTH INSURANCE CARRIER		POLICY NUMBER	

**Liability Release.** For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, I \_\_\_\_\_, as parent or legal guardian of \_\_\_\_\_, a minor (hereinafter "Minor"), hereby grant the permission necessary to allow Minor to participate in the above camp to be conducted by Varsity Spirit Corporation ("Varsity Spirit") d / b / a Cheerleading Technique Camps ("CTC"). I, in my own behalf and on behalf of Minor, further agree to release and to hold harmless Varsity Spirit, Varsity Spirit's Corporate Sponsors (hereinafter "Sponsors"), the Hosting site, (high school, university, hotel, convention center) on whose premises the Camp will occur (hereinafter the "Location") the affiliates of Varsity Spirit and the Location, and the respective directors, officers, representatives, members, agents and employees of Varsity Spirit, Sponsors, the Location and their respective affiliates (hereinafter collectively "Releasees") from any and all liability whether caused by the negligence of the Releasees or otherwise for any claim, judgment, loss, liability, cost and expenses (including, without limitations, attorney's fees and costs) arising out of or connected with the Camp, including any claim arising out of or connected with any illness or injury (minimal, serious, catastrophic and / or death) that Minor may incur or sustain during the Camp, all activities associated with the Camp and while traveling to and from the site for the Camp whether or not the Camp actually occurs. I further expressly agree to indemnify and hold harmless Releasees and Releasees' heirs, successors, assigns, executors and administrators against loss from any further claims, demands or actions that may subsequently be brought by Minor or by any other persons on the account of damages of any character resulting to Minor in any way from the foregoing activities. I further agree to reimburse and to make good to Releasees any loss or costs Releasees may have to pay as a result of any such action, claim, or demand.

I, in my own behalf and on behalf of Minor, hereby warrant that I have read this Liability Release in its entirety and fully understand its contents.

I, in my own behalf and on behalf of Minor, am aware that this Liability Release releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I, in my own behalf and on behalf of Minor, further acknowledge that nothing in this Liability Release constitutes a guarantee that the Camp will occur. I, in my own behalf and on behalf of Minor, have signed this document voluntarily and of my own free will.

Signature of Parent or Legal Guardian:  \_\_\_\_\_ Date: \_\_\_\_\_

**Medical Release.** I, in my own behalf and on behalf of Minor, acknowledge and agree that such participation subjects Minor to possibility of physical illness or injury (minimal, serious, catastrophic and/ or death) and that I, in my own behalf and on behalf of Minor, acknowledge that Minor is assuming the risk of such illness or injury by participating in the camp. In the event of such illness or injury, I authorize Varsity Spirit to obtain necessary medical treatment of Minor and hereby, in my own behalf and on behalf of Minor, release and hold harmless Releasees in the exercises of this authority. I further acknowledge and understand that I will be responsible for any and all medical and related bills that may be incurred on behalf of Minor for any illness or injury that Minor may sustain during the Camp and while traveling to and from the site for the Camp whether or not the Camp actually occurs.

I represent that any medication to which Minor is allergic or medications that Minor is currently taking are listed below. I agree that Minor shall bring medications which Minor is currently taking with him / her to the Camp and that he / she shall consume the prescribed dosage for such medications. **Varsity Spirit will not administer or supply any type of medication at camp.**

Medications (if any): \_\_\_\_\_

Allergic to (if any): \_\_\_\_\_

I acknowledge that Minor suffers from the following condition(s): \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_

Birthdate: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

(not required but helpful for quick verification of insurance policy by hospital/clinic)

Emergency Information: Name: \_\_\_\_\_ Daytime Telephone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Evening Telephone: (\_\_\_\_) \_\_\_\_\_

**Appearance Agreement.** I understand that Varsity Spirit d / b / a CTC from time to time produces promotional material relating to its programs. I understand that as a participant and/ or a spectator at the Camp that Minor may be included in videotapes, Photographs, DVDs, podcasts and videocasts taken during the Camp. Therefore, without reservation or limitations, I, in my own behalf and on behalf of Minor, hereby assign, transfer and grant to Varsity Spirit d / b / a CTC, its successors, assignees, licensees, sponsors, any television networks, and all other commercial exhibitors the exclusive right to photograph and / or videotape Minor and to utilize such videotapes and photographs and Minor's name, face likeness, voice and appearance as a part of the Camp, in advertising and promoting the Camp or in advertising and promoting similar future events. I further understand that neither Varsity Spirit nor any third party is under any obligation to exercise any of the foregoing rights, licenses and privileges. I waive any right to inspect or approve the copies of any promotional materials related thereto.

**Camp Rules.** I further acknowledge and understand that Varsity Spirit d / b / a CTC has established rules and regulations pertaining to conduct, behavior and activities of all Camp participants, by which Minor and I agree to abide during the Camp (copy of which is listed below), and that Minor and I will be responsible for his/her/my failure to abide by those rules and regulations. Minor and I have received, read and understand the Camp rules. Minor and I understand that violation of the rules can result in dismissal from Camp with no refund.

I, in my own behalf and on behalf of Minor, hereby warrant that I have read this Participant Release and Waiver Form in its entirety and fully understand its contents. I, in my own behalf and on behalf of Minor, am aware that this Participant Release and Waiver Form releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I, in my own behalf and on behalf of Minor, further acknowledge that nothing in this Participant Release and Waiver Form constitutes a guarantee that the Camp will occur. I, in my own behalf and on behalf of Minor, have signed this document voluntarily and of my own free will.

Signature of Parent or Legal Guardian:  \_\_\_\_\_ Date: \_\_\_\_\_  
Relationship to Minor: \_\_\_\_\_

I, identified above as Minor, acknowledge that I have read this Release and Waiver form.

Signature of Minor:  \_\_\_\_\_ Date: \_\_\_\_\_  
Witness Signature:  \_\_\_\_\_ Date: \_\_\_\_\_  
Witness Address: \_\_\_\_\_

## CAMP RULES

1. Cheering, chanting and dancing will be practiced in designated areas ONLY.
2. Squads / teams must be on time to all classes and camp functions.
3. Please leave valuables at home (rings, jewelry, etc.). CTC will not be responsible for lost or stolen items.
4. Contact your CTC Head Instructor before seeking medical attention at a clinic or hospital.
5. The use, consumption or possession of alcohol or other illegal substances is prohibited.
6. Smoking at camp is prohibited.
7. Hazing or initiations of any type is prohibited (this entails anything that may embarrass or cause an individual to stand out at camp).
8. Participants must have an adult chaperone / coach in attendance at all times during the camp.
9. Medical Release Forms must be copied and the original given to the CTC Head Instructor before any camp activities begin on the first day. The coach is responsible for having copies of the squads / teams medical forms with him/her during camp.
10. Have an emergency plan (including emergency numbers, emergency exits, first aid kit, etc.).