Release and Waiver Form - Winter Park Cheer Athletics

Child's First Name: Last Name:
SS#
(not required but helpful for quick verification of insurance by hospital)
Date of Birth:
Current Grade:
Parent or Guardian:
Home Phone: Cell#:
Address: City:
State: Zip: Parent Email:
In case of an emergency please notify:
Name: Relationship:
Phone Number:
Medical Insurance Provider:
Policy#:
Is the minor currently taking any type of known medications? Yes or No (please circle) If (yes) please list the medications:
Is the minor being treated for any type of medical condition? Yes or No (please circle) If (yes) please explain:
Is the minor allergic to any known medications or suffer from any allergies? Yes or No (please circle) If (yes) please explain:

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Liability Release, I	It to hold harmless Winter Park Cheer Athletics the affiliates of Winter Park Cheer Athletics that and employees of Winter Park Cheer Athletics and employees (including, without limitations, at sing out of or connected with any illness or in ustain during the event, all activities associate the event actually occurs. I further expressly executors, and administrators against loss force to reimburse and to make good to Release of the Minor, am aware that this Liability Release of the Minor, am aware that this Liability Release of the Minor, am aware that this Liability Release on of the risk of injury or illness. I, in my own of the risk of injury or illness. I, in my own of the risk of injury or illness. I, in my own of the Minor, acknowledge and agree that such put astrophic and/or death) and that I, in my own asses in the exercises of I will be responsible for any and all medical arry that the Minor may sustain during the event of the event that I may be included in video ions, and the event that I may be included in video ions, and the event that I may be included in video ions, and the event that I may be included in video ions, and privileges. Age Verification I, in my own that the Winter Park Cheer Athletics nor any and privileges. Age Verification I, in my own that the Winter Park Cheer Athletics nor any and privileges. Age Verification I, in my own that I agree to not allow the dosor N.F.H.S. Standards. The standards and contains an acknowledgement dedge that nothing in this Participant Release dedge that nothing in the Park Cheer Athletics nor any and privileges.	ogram within WPCA. I, in my own cs., the hosting site on whose and the Location, and the letics, the Location and their by the negligence by the "releases" ctorney's fees and costs) arising nigury (minimal, serious, ed with the event and while ragree to indemnify and hold from any character resulting to see any loss, or cost Releases may e in its entirety and fully ease from liability and contains and behalf and on the behalf event will occur. I, in my own coarticipation subjects Minor to who behalf and on the behalf of the event. In the event of such injury and hereby, in my own behalf and and related bills that may be ent and while traveling to and comotional material relating to its otapes or photographs taken whiletics, its successors, assignees, whotograph and/or videotape the ing the event or in advertising and third party is under any behalf and on behalf of the minor ne Minor to be placed in an age extrand its contents. I am aware t of my voluntary and knowing
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Parent/Guardian Signature: X		
Date:	-	
Witness Signature: X		
Date:	-	
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Updated January. 2016