



**CHEER CO ALL-STAR CHEER AND DANCE  
MEDICAL RELEASE/LIABILITY FORM**

Cheer/Dance Medical Release: \_\_\_\_\_ Date: \_\_\_\_\_

Participant's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

In case of emergency notify: \_\_\_\_\_ Phone: \_\_\_\_\_

Secondary contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance and Medical Information:

Insurance Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_  
(need copy of insurance card) (Current physical is required after becoming part of the Cheerleading/Dance Team)

Family Physician: \_\_\_\_\_ Phone #: \_\_\_\_\_

Please list any physical/psychological limitations, injuries or weaknesses that may affect the athlete (including allergies to food and medication): \_\_\_\_\_

**Vigorous Activity:** The sport you will be participating in will involve vigorous athletic activity and may include, but not limited to, stunts, mounts, gymnastics, jumps, tumbling and dance. Due to the nature of the activity the possibility of serious injury/death does exist as with any athletic activity.

**Parental Consent:** I/we, the undersigned Parent/Guardian do authorize CHEER CO and its staff, coaches, volunteers, employees and officers to seek treatment for injury or illness to my/our child while participating or traveling and also authorize a licensed physician, hospital or medical clinic to perform treatment to any injury/illness to my/our child. I/we authorize payment for treatment, either personally or through our family health insurance. I/we have read the above information about the risk of vigorous athletic activity. The participant is in good health and physically capable of participating in any practice, class or event.

This release includes but is not limited to any claims of negligence, dangerous condition, latent defect, premises liability, code violation, negligent security, failure to warn, vicarious liability, negligent hiring, negligent supervision, negligent maintenance, or improper/dangerous equipment; it is intended to be as broad as permissible under Florida Law.

I/we do authorize CHEER CO to use appropriate promotional photographs and videos taken of my child(ren), myself during any event, class, practice, etc. in future publications, displays, web sites or distributions (flyers, brochures, special events, etc.). I understand that there may be at any time continuous videotaping and photography taken at competitions, events, practices, camps and tryout sessions, etc.

I/we acknowledge and are fully aware of the risks involved in the event and grant permission for my/our child to participate and assume those risks. I further agree to hold harmless CHEER CO and its associated officers, coaches, employees, volunteers and staff for any injury sustained as a result of my child's participation in any and all events and/or travel. I/we in my/our own behalf and on behalf of the Minor, have signed this document voluntarily and of my own free will.

**Signature of Parent/Guardian:** \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_