



2007 Cheer Ltd. Private Camps and Clinics

**WAIVER OF LIABILITY/MEDICAL/PUBLICITY RELEASE FORM**

I (parent or guardian), \_\_\_\_\_ hereby waive and absolve Cheer Ltd., Inc., and all divisions thereof any and all liability and responsibility for injuries, sickness, accidents, and/or acts of God incurred during participation and activities in the 2007 Cheer Ltd. Private Camp / Clinic by

myself/my child \_\_\_\_\_ Upcoming 2007-2008 Grade\_\_\_\_\_.

I (parent or guardian), \_\_\_\_\_, do hereby acknowledge that myself/child

has insurance coverage.....or..... has no insurance coverage

and I (parent or guardian) \_\_\_\_\_ accept the financial responsibility for care and/or treatment (myself/child) \_\_\_\_\_ should need in the case of an emergency during the 2007 Cheer Ltd. Summer Camp / Clinic or activities. I agree not to hold Cheer Ltd. or any of its assigned representatives or agents financially responsible for care and/or treatment needed in case of an injury to the above named participant.

In consideration of my signed release allowing my child/myself to participate in this Cheer Ltd., Inc. event, I, intending to be legally bound, do hereby, my heirs, executor and administration, waive, release, and forever discharge any and all rights and claims for damage which I may have or which may hereafter accrue to me against Cheer Ltd., Inc., the directors or their respective employees, office, agents, representative, successors, and/or assignee, for any and all damages which may be sustained or suffered by me or my child in connection with my association with or participation in, or rising out of travel to and/or return from the respective Cheer Ltd., Inc. site. In the event of injury/accident/sickness, Cheer Ltd., officials and/or instructors are to contact the designated adult listed below.

I hereby give my permission for myself/my child to be photographed, videotaped, and/or audio taped during any Cheer Ltd. activity. I further give permission for such photographs, videotapes, and audiotapes to be used in print or broadcast media as deemed appropriate for promotion of Cheer Ltd. activities and for publicity surrounding participation in Cheer Ltd. events. (Please Print Legibly)

<p><b>IN CASE OF EMERGENCY, CALL:</b></p> <p>Name: _____</p> <p>Relationship: _____</p> <p>Home Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Home Phone: (_____) _____</p> <p>Cell Phone: (_____) _____</p> <p>Business Phone: (_____) _____</p> <p>Doctor's Name: _____</p> <p>Dr. Phone: (_____) _____</p>	<p><b>Participant of 2007 Private Camp/Clinic</b></p> <p>Participant Name: _____</p> <p>School/Team Participating in 2006 Private Camp/Clinic: _____</p> <p>Home Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Home Phone: (_____) _____</p> <p>Insurance Company: _____</p> <p>Policy # (REQUIRED): _____</p> <p><b>**Ins Co., Policy # and Signature are required in order for participant to be cleared to participate.</b></p>
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Responsible Party's Signature

Date

Do Not Fax Forms to Cheer Ltd. Parents please return this form to the coach. The coach submits the original waivers at the camp/clinic.