



TEXAS CHEER

OPEN GYM FORM

ASSUMPTION OF RISK, WAIVER OF LIABILITY, AND INDEMNIFICATION AGREEMENT

Participant Last Name	Participant First Name	Participant Age
Address	City	State/Zip Code
Parent Contact	Phone Number 1	Phone Number 2
Email Address		
Emergency Contact	Phone Number 1	Phone Number 2

CONSENT-

I do hereby grant TEXAS LONESTAR CHEER COMPANY, INC., to care for the participant listed above.

In case of emergency, I give permission to the emergency and hospital staff to administer immediate treatment should he/she be injured or sick.

I fully understand that any and all expenses resulting from treatment are my responsibility.

The risk of injury involved in participating is significant, including the potential for permanent disability and death. While particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist.

I knowingly and freely assume all such risk, both known and unknown, and assume full responsibility for participation.

I agree to hold harmless TEXAS LONESTAR CHEER COMPANY, INC., its staff and any event faculty for any injury as a result of participation.

I understand I am giving up substantial rights, including my right to sue for any reason including negligence.

I understand and will not hold TEXAS LONESTAR CHEER COMPANY, INC., responsible for loss of any personal items.

Signature of Participant	Date
Signature of Parent	Date