



REGISTRATION AND WAIVER FORM

PLEASE CIRCLE ONE-

REC CHEER - OPEN GYM – TUMBLING – CLINIC - PRIVATE TRAINING - MUSICAL THEATER

ATHLETE INFORMATION

Participant's full name _____ Age _____ Date of birth _____

Address _____ City _____ State _____ Zip _____

Participant's phone number _____ Email address _____

PARENT/GUARDIAN INFORMATION

Parent/ Guardian Name _____

Phone _____ Email _____

Emergency contact _____ Phone _____

MEDICAL INFORMATION

Insurance provider _____ Policy# _____

Is the minor being treated for any type of medical condition? YES NO (please circle)

If yes please explain _____

Is the minor allergic to any known medications or suffer from any allergies? YES NO (please circle)

If yes please explain _____

Is the minor currently taking any type of medications? YES NO (please circle)

If yes, please list medications _____

MEDIA RELEASE

I (Parent's name) _____ and/or (Participant's Name) _____ give Eastside Edge Cheer and Dance, LLC the right and permission to photograph, or video tape my daughter /son or me (myself/advisor/coach/chaperone) for any reproductions associated in any way connected with said television or filmed event; in particular, reproduction for use in any form of advertisement for Eastside Edge Cheer and Dance, LLC promotional purposes.

PARENT PERMISSION AND RELEASE AGREEMENT

(Participant's name) _____ has my permission to try-out and/or participate at Eastside Edge Cheer and Dance, LLC and to participate in Eastside Edge Cheer and Dance, LLC events. I fully understand that I myself, the parent/guardian, and my son/daughter must abide by all rules and guidelines set forth by Eastside Edge Cheer and Dance, LLC.

RISK RELEASE AGREEMENT

I understand that by the very nature of the activity, cheerleading training, gymnastics, dance and practice carries a risk of physical injury up to and including death. No matter how careful the cheerleader/gymnast and coach are; no matter how many spotters are used; no matter what height is used or what landing surface exists, the risk cannot be eliminated. Reduced by each act but not eliminated. The customer(s) voluntarily assume all risk that subsequent to the execution of the Agreement, student may incur or suffer personal or bodily discomfort, loss, injury, disability, death, damage, or property damage or any which are in some way caused by or related to the instruction activities or services provided by Eastside Edge Cheer and Dance, LLC; even in circumstance including but not limited to misconduct or negligence and the customer(s) fully understand that the previously stated physical risk conditions could become more serious than the undersigns expects, or anticipates

_____ Please initial that you have read, understand and agree to the above Risk Release Agreement.

Liability Release, Indemnity, and Emergency Medical Response

- I agree to hold harmless and release all liability of Eastside Edge Cheer and Dance, LLC and its staff, the event facility, and/or official hotel for any injury, whether such injury results from the negligence of Eastside Edge Cheer and Dance, LLC or its officers, agents or staff, or some other cause, as a result of my daughter's/son's participation or my (myself/advisor/coach/chaperone) participation in any Eastside Edge Cheer and Dance, LLC event.
- It is agreed that I, my spouse, child(ren), my heir(s), and executors, forever waive and release any and all rights and claims for damages, whether such damage, loss or injury results from the negligence of Eastside Edge Cheer and Dance, LLC or its officers agents or employee, or some other cause, that I, my spouse, my child(ren), or my heir(s), and executors may have at any time against the Eastside Edge Cheer and Dance, LLC Parents, Association or its representatives, Eastside Edge Cheer and Dance, LLC or its representatives, shareholders, and staff whether paid or volunteer, for any injuries or damages in connection with the instructional or competitive programs or other activities related to Eastside Edge Cheer and Dance, LLC and/or any injuries or damages in connection with traveling/transporting to and/or from competitions, exhibitions, or prearranged outings. The risks involved with such activity are fully understood.
- I understand that Eastside Edge Cheer and Dance, LLC staff members are not physicians or medical practitioners of any kind. I hereby give permission to the Eastside Edge Cheer and Dance, LLC staff to render temporary or basic first aid to my child(ren) or myself in the event of injury or illness. I agree to hold harmless Eastside Edge Cheer and Dance, LLC and its staff for any injury, whether such injury results from the negligence of Eastside Edge Cheer and Dance, LLC or its officers, agents, or staff or some other cause resulting from rendering temporary or basic first aid.
- I understand that by taking part in any Eastside Edge Cheer and Dance, LLC event, there is a possibility of injury or sickness to my daughter/son or to me (myself/advisor/coach/ chaperone). In the event that I cannot be reached, I hereby authorize Eastside Edge Cheer and Dance, LLC and its' employees, whether paid or volunteer to give consent for my son/daughter to receive medical treatment including transportation by Eastside Edge Cheer and Dance, LLC staff member or its representatives, whether paid or volunteer, to any health care facility or hospital, or calling the paramedics or ambulance for said child should the Eastside Edge Cheer and Dance, LLC staff deem necessary. I do hereby grant permission to the hospital staff members to administer immediate treatment to my child should she/he be injured, or to me (myself/advisor/coach/chaperone).
- I understand and affirm that I now have and will continue to provide proper hospitalization, health and accident insurance coverage, for both my child's protection and my own protection.

_____ Please initial that you have read, understand and agree the above Liability Release, Indemnity and Emergency and Medical Response.

By signing below, I agree to the above Registration Policy, Parent Permission, Media Release and Risk and Liability Release Agreement

Participant Signature _____ Date _____

Parent Signature _____ Date _____