



TEXAS ALLSTAR CHEER
(ALLSTAR CHEER & DANCE OF TEXAS, INC.)



Parental Permission / Release of All Claims / Consent to Medical Treatment
BIRTHDAY PARTIES

Participant's Name _____ Date _____
(Additional participants in same family) _____
Name of Parent/Guardian _____ Phone _____
Address _____ City _____, State _____ Zip _____
Emergency Contact Name _____ Phone _____

Please read and sign the following:

I/we the parent(s)/guardian(s) of the above mentioned Participant (whether one or more) do hereby grant permission for the Participant to participate in any and all cheerleading, tumbling, dance and/or other physical activities (whether one or more, "activities") while a participant at **TEXAS ALLSTAR CHEER**, whether at or away from the training facility of **TEXAS ALLSTAR CHEER** (address set forth below - "training facility"). I/we represent that the Participant is physically able to participate in the activities without limitations. I/we acknowledge and agree it is my/our responsibility to promptly inform **TEXAS ALLSTAR CHEER** in writing of any health updates regarding the Participant throughout the year.

I/we give **TEXAS ALLSTAR CHEER** the right and permission to film, photograph, or videotape my/our Participant or me/us for any reproductions associated or in any way connected with **TEXAS ALLSTAR CHEER** (including any form of advertisement or promotional purposes).

The Participant will be coached, instructed and conditioned to compete at the peak of his/her ability. Along with competition and effort to acquire excellence is the reality of possible injury. I/we understand that there is personal risk involved in any activity that includes motion or height and that these activities can result in SEVERE INJURIES, DISABILITY OR EVEN DEATH. I/we, the Participant or parent(s)/guardian(s) of the Participant are assuming full responsibility for the Participant's personal safety and I/we do hereby release and hold harmless **TEXAS ALLSTAR CHEER**, its employees, supervisors, instructors (whether paid or volunteer), agents, invitees, employees, officers, directors and shareholders from any and all claims, demands, actions, expenses (including attorney's fees, threatened or incurred), judgments, executions and liabilities that may occur from any injury, accident and/or incident (known or unknown), including death to the Participant, that may arise as a result of the Participant's attendance at the training facility or as a result of the Participant's participation in **TEXAS ALLSTAR CHEER** activities, or otherwise, and regardless of any negligence on the part of **TEXAS ALLSTAR CHEER**.

I/we further authorize a representative of **TEXAS ALLSTAR CHEER** to consent to medical treatment of the Participant in the event of an emergency while at or away from the training facility. I/we give permission for **TEXAS ALLSTAR CHEER** to give my/our Participant first aid and to arrange for transportation to a hospital and receive emergency medical treatment. I/we will assume all costs for such medical care.

Participant or Parent(s)/Guardian(s) Signature _____ Date _____