

CheerExpo Championships Waiver Form

Please fill out the entire form. One form must be FULLY READ and completed for/by EACH MEMBER AND COACH. The original signed copy must be remitted to CheerExpo (do not send via fax). If your child is competing on multiple teams please remit one copy to the coach of EACH team (photocopies are permitted as long as one copy is the original).

Participants Name: _____ Age: _____ Grade: _____

Date of Birth (D/M/Y): _____ School/Club/Team Name: _____
(Please list all)

Home Address: _____

Phone: (_____) _____ Email: _____
(Include Area Code)

Position of Participant (circle one): Coach Athlete Teacher Advisor Parent Ex-Athlete Other

Insurance Company*: _____ Policy Number*: _____
(*Required for foreign and US residents only)

REQUIRED*: Canadian Residents Only. Provincial Health Program Number (i.e. Health Card Number, OHIP,

Medicare, etc): _____ Expiry Date: _____
(if applicable)

Medical Conditions: _____

Allergies: _____

Parent/Guardian Name(s): _____

Phone: (_____) _____ Alternate Phone: (_____) _____
(include area code) (include area code)

Additional Emergency Contact Name(s): _____

Phone: (_____) _____ Alternate Phone: (_____) _____
(include area code) (include area code)

In this activity, as in all athletic activities, there is an inherent risk of injury and/or death. I do hereby on behalf of myself and/or my child, my family and friends, release and forever discharge the event facility (venue), Cheer Nova Scotia (CNS), CheerExpo Cheerleading and Dance Events Inc (CheerExpo), and their respective employees, partners, members, volunteers, instructors, exhibitors, clients, contractors, directors, speakers, officers, and owners (together, the "Releasees") from any and all claims, demands, and causes of action for any injury to persons or property resulting from participation in CheerExpo competitions, events, and or activities, including traveling to and/or from the event(s). I further attest and acknowledge that I/my child am/is in good medical condition and am/is physically able to participate in this event. A chaperone/ adult (over the age of 21) is required to attend with participants. This chaperone will be responsible for the participants at all times. The Releasees are not responsible for the supervision of participants. I understand and consent to the fact that myself/my child may be photographed and/or videotaped at the event for commercial, training or promotional purposes.

I also understand that in the event of injury or sickness, first aid will be rendered and/or if necessary, or instructed to do so, I give permission to take myself/my child to such a place as may be necessary for proper care. I grant permission for any hospital or clinic staff members to administer immediate treatment if necessary. I further acknowledge and understand that I will be responsible for any and all medical and related bills that may result. More information about CheerExpo, including contact information, can be found at www.cheerexpo.com. CheerExpo is a division of CheerExpo Cheerleading and Dance Events, Inc. More information about Cheer Nova Scotia can be found at www.cheerns.com

Parent/Guardian

Signature: _____ Date (D/M/Y): _____

Participant Signature if 18 or Over