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:			
Iome Address:			,
Phone: () Email:			
Position of Participant (circle one): Coach			Spare Other
Canadian Residents: Health Card #:		_ Expiry:	
REQUIRED: Foreign Residents Only. Health insurance coverage for Canada is required			
Insurer:	Policy #:		Expiry:
Medical Conditions:			
Parent/Guardian Name(s):			
Phone: () Alternate Phone: ()			
Phone: () Alt			
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 may 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 <u>www.cheerexpo.com</u> . CheerExpo is a division of CheerExpo Cheerleading and Dance Events, Inc. More information about Cheer Nova Scotia can be found at <u>www.cheerns.com</u>			
Parent/Guardian Signature: Participant Signature if 18 o		Date (D/M/Y):	