



SPIRIT ELITE ALLSTARS



2014 Club Waiver Form:

I, _____, understand that cheerleading has an inherent danger in participation, and that in spite of all precautions and accident preventatives, injuries do occur. I intend to be legally bound and do, hereby, for myself, my heirs, executors and administrators, waive, release and forever discharge all claims which may arise now or in the future which I may accrue against SPIRIT ELITE ALLSTARS, and any of its employees for any and all injuries suffered by me while attending and participating in cheerleading try outs and activities.

In order that I receive the necessary medical treatment in the event of an injury or illness during any event I hereby authorize SPIRIT ELITE ALLSTARS to obtain medical treatment for myself for such injury or illness during any event, and I hold SPIRIT ELITE ALLSTARS harmless in their exercise of the authority.

To the best of knowledge, I do not have any diseases or injuries that would medically prohibit my participation in training and while trying out for and participating in cheerleading activities at SPIRIT ELITE ALLSTARS.

I further certify that I have read and understood the above statements and that the information provided is truthful to the best of my knowledge.

Athlete's name: _____ Date: _____

Athlete's signature: _____

Parent/Guardian Acknowledgment Statement (required if athlete is under 18)

I/we have read the above statement and agree to the conditions of this try out & training release and waiver as outlined above. I/we consent to allow our son/daughter to try out & participate in training and other activities if selected at SPIRIT ELITE ALLSTARS.

Parent/Guardian name: _____ Date: _____

Parent/Guardian signature: _____

