

SCV ALL-STARS 2011-2012

Participant Registration & Release Form

Athlete's Name: _____ Phone: (____) _____
Address: _____ Birth date (MM/DD/YY): ____/____/____
City, State, Zip: _____ Age on August 31, 2011: _____
Mother's Name: _____ Mother's Cell: (____) _____
Father's Name: _____ Father's Cell: (____) _____
School: _____ Grade 2011-12: _____ Family E-mail: _____

Are you involved in anything that could conflict with SCV All-Stars? _____

How did you hear about SCV All-Stars? _____

Please list any physical limitation, pre-existing injury, or other weakness that may affect athlete's participation:

Medical Ins. Carrier: _____ Policy #: _____ Medicines allergic to: _____

Emergency Contact: _____ Phone: (____) _____

Authorization and Release

I authorize SCV Cheer Company, Inc. and its representatives to consent to medical treatment or procedures for my child when I cannot be reached in cases for emergency. I also give SCV Cheer Company, Inc. and its representatives permission to administer the necessary emergency care to stabilize and/or improve the current injury or condition that my child may have sustained during activities related to SCV Cheer Company instruction, practices, or performances. No prior determination to life threatening emergency or danger of serious or permanent injury resulting from treatment need be made under this authorization.

SCV Cheer Company, Inc. takes great care to provide maximum safety procedures, guidelines, and enforcement, and cannot assume responsibility for any accidents or injuries that may occur. I fully understand that any activity involving motion, athletic activity, and/or gymnastic equipment such as gymnastic floors and trampolines, carries the possibility of injury, and I further agree to hold SCV Cheer Company, Inc. and its staff, officers, or representatives harmless for any injury or resulting expenses. I release and discharge all rights and claims against SCV Cheer Company, Inc. and its parties.

I authorize SCV Cheer Company, Inc. to use photographs, video, and/or other likenesses of my child for use in its promotional materials or sales and waive any rights of compensation or ownership thereto.

Parent/Legal Guardian Signature: _____ Date: _____