

# Varsity Spirit Championship Release & Waiver Form – Participant

Every Participant must have a completed and signed release form to turn in at registration in order to participate. ALL areas must be completed. **Please photocopy and distribute to each person attending the event.**  
**Coach must retain a photocopy of each completed form for your records and keep them with the team throughout the event.**

_____ Minor's Name	_____ Name of Parent / Legal Guardian	_____ Name of Event
_____ Address	_____ School Name	_____ City, State of Event
_____ City, State & Zip	_____ School Address	_____ Event Dates
(_____)_____ Phone Number	_____ School City, State & Zip	
_____ Participant Email Address	(_____)_____ School Phone Number	_____ Parent / Legal Guardian Email Address

**Liability Release.** For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, I \_\_\_\_\_, as parent or legal guardian of \_\_\_\_\_, a minor (hereinafter "Minor"), hereby grant the permission necessary to allow Minor to participate in the above ("Event") to be conducted by Varsity Spirit LLC ("Varsity Spirit") d/b/a National Cheerleaders Association (NCA) and/or d/b/a Universal Cheerleaders Association (UCA.) I, in my own behalf and on behalf of the Minor, further agree to release and to hold harmless Varsity Spirit, Varsity Spirit's corporate sponsors (hereinafter "Sponsors"), vendors and contractors, the hosting site, (university, hotel, convention center, high school) on whose premises the Event will occur (hereinafter the "Location") the affiliates of Varsity Spirit, and the respective directors, officers, representatives, members, agents and employees of of the preceding parties (hereinafter Releasees") from any and all liability whether caused by negligence of the Releasees or otherwise for any other claim judgment, loss, liability, cost and expenses (including, without limitations, attorney's fees and costs) arising out of or connected with the Event, including any claim arising out of or connected with any illness or injury (minimal, serious, catastrophic and / or death) that I may incur or sustain during the Event, all activities associated with the Event and while traveling to and from the site for the Event whether or not the Event actually occurs. I further expressly agree to indemnify and hold harmless Releasees and Releasees' heirs, successors, assigns, executors and administrators against loss from any further claims, demands or actions that may subsequently be brought by Minor or by any other persons on the account of damages of any character resulting to Minor in any way from the foregoing activities. I further agree to reimburse and to make good to Releasees any loss, or costs Releasees may have to pay as a result of any such action, claim, or demand.

I, in my own behalf and on behalf of the Minor, hereby warrant that I have read this Liability Release in its entirety and fully understand its contents. I, in my own behalf and on behalf of the Minor, am aware that this Liability Release releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I, in my own behalf and on behalf of the Minor, further acknowledge that nothing in this Liability Release constitutes a guarantee that the Event will occur. I, in my own behalf and on behalf of the Minor, have signed this document voluntarily and of my own free will.

**Signature of Parent or Legal Guardian:** X \_\_\_\_\_ **Date:** \_\_\_\_\_

**Supervision.** A Chaperone/Adult (age 21 or older) is required to attend with participants. This Chaperone will be responsible for the participants at all times. The Releasees are not responsible for participants' supervision.

**Medical Release.** I, in my own behalf and on behalf of the Minor, acknowledge and agree that such participation subjects Minor to possibility of physical illness or injury (minimal, serious, catastrophic and/or death) and that I, in my own behalf and on behalf of the Minor, acknowledge that the Minor is assuming the risk of such illness or injury by participating in the Event. In the event of such illness or injury, I authorize Varsity Spirit to obtain necessary medical treatment for Minor and hereby, in my own behalf and on behalf of the Minor, release and hold harmless Releasees in the exercises of this authority. I further acknowledge and understand that I will be responsible for any and all medical and related bills that may be incurred on behalf of the Minor for any illness or injury that Minor may sustain during the Event and while traveling to and from the site for the Event whether or not the Event actually occurs.

I, in my own behalf and on behalf of the Minor, hereby warrant that I have read this Participant Release and Waiver Form in its entirety and fully understand its contents. I, in my own behalf and on behalf of the Minor, am aware that this Participant Release and Waiver Form releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I, in my own behalf and on behalf of the minor, further acknowledge that nothing in this Participant Release and Waiver Form constitutes a guarantee that the Event will occur. I, in my own behalf and on behalf of the Minor, have signed this document voluntarily and of my own free will. Minor and I understand that Sponsors may distribute samples of their products at the event.

**Signature of Parent or Legal Guardian:** X \_\_\_\_\_ **Date:** \_\_\_\_\_

Relationship to Minor: \_\_\_\_\_

Witness Signature: \_\_\_\_\_ Date \_\_\_\_\_ Minor Birthdate: \_\_\_\_\_

Witness Address: \_\_\_\_\_