

EIGHT COUNT CHEER ACADEMY

Athlete Information

Competitive ☐ Recreation ☐

Name: <i>(as on birth certificate)</i>		Date of Birth: <i>(day/month/year)</i>
Home Address:		
City:	Province: Ontario	Postal Code:
Home Phone #:	Athlete's Email Address:	

Parent/Guardian Information

Mother's Name:	Father's Name:
Address: <i>(if different from athlete's address)</i>	Address: <i>(if different from athlete's address)</i>
Mother's Cell #:	Father's Cell #:
Mother's Email:	Father's Email:

Alternate Contact Name:	Phone #:
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Medical Information – Please provide details for all which apply

Health Card #:	
Allergies:	EpiPen: Yes No
Asthma: Puffer: Yes No	Contact Lenses:
Diabetes: Insulin Injections: Yes No	Migraines:
Seizures/Epilepsy:	Fainting Spells:
Heart Trouble:	High Blood Pressure:
Previous Concussions:	Pre-existing injury being treated:
Recurring Sore Throat/Nose Bleeds:	Medical condition being treated:
Current Medications:	Self medicating: Yes No
Doctor:	Doctor's Phone #:
I hereby grant permission to licensed hospitals and/or health care staff members to administer immediate medical treatment as deemed necessary to me/my child should I/she/he be injured during a Eight Count Cheer Academy event at which I am she/he is participating. Further, I understand that I am responsible for payment of expenses incurred relating to my own/ my daughter's/son's medical treatment.	
Athlete Signature (18 years or older):	
Parent/Guardian Signature (athlete under 18):	

ENSURING SUCCESS

Cheerleading is a combination of strength and stamina; tumbling, stunting and dance. It is a co-active sport and requires full attendance of all team members at all practices and all competitions. Routines involve stunts with consistent groups of athletes, tumbling runs that have athletes crossing in front of each other, as well as close movements and directions between athletes. Everything is orchestrated with a full team in attendance. When one athlete is missing from practice, it affects the team as a whole, it increases the risk of athlete collisions during formation changes and tumbling runs, as well as stunts cannot be worked on in order to perfect and reduce the risk of falls. Routines are produced with the team size and athletes skills in consideration and need to be practiced and perfected.

Being a member of the Eight Count Cheer Academy program is a great responsibility and commitment, not only for the athletes, but for the families of those athletes. Team unity and sportsmanship are very important to this program. The support and commitment of both the athlete and their family is a necessity. It is important to be positive and respectful at all practices, events and competitions. We are trying to create a positive environment for all participants on and off the cheer floor.

By registering, you are not only making a team commitment, you are also making a financial commitment. Much of the cost involved is time sensitive and therefore affects the deadlines presented. We understand that life can be a challenge sometimes with making payment deadlines. Payment plans can be adjusted accordingly if notification is given in a timely manner.

The expectations of Eight Count Cheer Academy are set out to maintain fairness and consistency and to protect the investment that Eight Count Cheer Academy, each athlete, each family and every coach has put forth.

I have read and agree to the above Ensuring Success.

Parent Signature: _____

WELCOME TO THE EIGHT COUNT CHEER FAMILY

PUBLICATION WAIVER

Eight Count Cheer Academy routinely promotes activities through various media. This includes, but is not limited to, newsletters, newspapers, brochures, displays, programs, social media and web pages. In doing so, the names of members may be included, with their permission and parent consent, to help tell the Eight Count Cheer Academy story. On websites, members may appear in photos with their permission and parent consent. Please initial for YES or NO and sign and date for this release.

YES _____ **NO** _____

Parent Signature: _____ **Date:** _____

READ BEFORE SIGNING

WARRANTY AND CONSENT

ASSUMPTION OF RISK RELEASE AND WAIVER OF LIABILITY INDEMNITY AGREEMENT

IN CONSIDERATION of allowing me to participate in the program, related events and activities of the **EIGHT COUNT CHEER ACADEMY.**

I WARRANT TO YOU THAT:

1. I am familiar with the risk of serious injury and death which any participant in this program must assume, and
2. I believe that I am physically, emotionally and mentally able to participate in this program, and that my uniform, practice wear, etc. fits and is suitable for my use in this program, and
3. I understand that all applicable rules for participation must be followed and that I take responsibility for personal safety, and
4. I will immediately remove myself from participation, and notify the nearest official, if at any time I sense or observe any unusual hazard or unsafe condition or if I feel that I have experienced any deterioration in my physical, emotional or mental fitness for continued participation in the program.
5. I acknowledge, because of the close proximity of athletes that the spread of infection, such as the COVID-19 virus, is possible and therefore accept that risk.

I UNDERSTAND AND AGREE, on behalf of myself, my heirs, assigns, personal representatives and next of kin, that my participation in this program and execution of this document constitutes:

1. an unqualified ASSUMPTION OF ALL RISKS associated with participation in this program by me even if arising from negligence, or gross negligence, including any compounding or aggravation of injuries caused by negligent rescue operations or procedures, of the program organizer and any persons associated therewith or participating therein, and
2. a FULL AND FINAL RELEASE AND WAIVER OF LIABILITY of the program organizer and all persons and organizations associated with it and the program including, without limiting the generality of the foregoing, its officers, directors, officials, agents and/or employees, other participants, sponsors, advertisers, owners and/ or lessors of the premises used to conduct the program, sanctioning bodies, medical or rescue personnel (the RELEASEES), of and from with the respect to all injury, disability, death or loss or damage to person or property whether arising from the negligence, or negligent rescue of or by the foregoing or otherwise, and
3. an UNDERSTANDING NOT TO SUE the RELEASEES for any loss, injury, costs or damages of any form or type, howsoever caused or arising, and whether directly or indirectly from the participation in this program by me, and
4. an AGREEMENT TO INDEMNIFY, and to SAVE and HOLD HARMLESS the RELEASEES, and each of them, from any litigation expense, legal fees, liability, damage, award or cost, of any form or type whatsoever, they may incur due to any claim made against them or any one of them whether the claim is based on the negligence or the gross negligence of the RELEASEES or otherwise.

I HAVE READ THIS DOCUMENT THOROUGHLY.

I UNDERSTAND THAT THE RELEASEES ARE RELYING UPON MY WARRANTIES, ASSUMPTIONS, WAIVER AND RELEASE, UNDERTAKINGS AND AGREEMENTS WHEN ACCEPTING MY PARTICIPATION IN THIS PROGRAM.

I UNDERSTAND THAT BY SIGNING THIS DOCUMENT I GIVE UP SUBSTANTIAL LEGAL RIGHTS I WOULD OTHERWISE HAVE.

I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT INDUCEMENT.

SIGNATURE OF PARTICIPANT

printed name of participant

SIGNATURE OF WITNESS

printed name of witness

DATE