

CHEERING CAMP WAIVER

June 28 & 29, 2019

Cheerleader's Name: _____ Grade Fall 2019: _____

Address: _____

Telephone: _____ DOB: _____ T-Shirt Size _____

Parent 1 Name: _____

Address: _____

Telephone: _____ Email: _____

Parent 2 Name: _____

Address: _____

Telephone: _____ Email: _____

Insurance Carrier: _____ Policy #: _____

Medical Conditions (allergies, asthma, etc): _____

I the parent/guardian of the above named participant with the Thornton Academy cheering camp, hereby give my approval to participate in any and all activities.

I know that participation in cheerleading may result in serious injuries and protective equipment does not prevent all injuries, and do hereby waive, release, absolve, indemnify and agree to hold harmless Thornton Academy, the organizers, sponsors, coaches, supervisors, board members, participants from any claim arising out of any injury to my child whether the result of negligence or for any other cause.

Parent/Guardian Signature: _____ Date: _____