

GULF COAST ELITE REGISTRATION FORM

Cheerleader's Full Name: _____

Birthdate: _____

School for 2017-2018: _____

Gender: M F Grade for 2017-2018: _____

Cheerleader Info

Mother's Name: _____

Father's Name: _____

Mother's Cell: _____ Father's Cell: _____

Parent E-mail: _____

Mailing Address: _____

City, State: Zip: _____

Alternate Emergency Contact:

Name: _____ Phone: _____ Relation to child _____

Medical Information

Do you have any allergies? YES NO

If Yes, list allergy and treatment: _____

Are you currently on any medication? YES NO

If Yes, list medication: _____

Have you had any type of surgery in the past year? YES NO

If Yes, please describe: _____

Have you had any type of head injury? YES NO

If Yes, please describe: _____

Do you have any chronic injuries or illnesses? YES NO

If Yes, please describe: _____

List any other information you think we may need:

Elite Tumbling Registration, Waiver and Liability Release Form

For Cheerleading Gymnastics/Tumbling

Today's Date: _____

Cheerleader's Name _____ Age: ____ Birth date: _____

Parent or Legal Guardian's Name: _____ Phone: _____

Address: _____

Emergency Contact & Phone: _____

Any intolerance to drugs or medication? _____

Any medication that is taken regularly? _____

Please list any current or previous health problems/conditions that may affect the cheerleader's physical activity:

Assumption of Risk, Release of Liability for Personal Injury, Medical Authorization

I, _____, for myself and as the parent and/or legal guardian of _____, age _____, do hereby release Gulf Coast Elite Cheer, its owners, operators, instructors, employees, agents, servants and affiliates from any and all liability or in any way related to my or my child's use of the facilities, equipment, or apparatus of Gulf Coast Elite Cheer; and /or my or my child's participation in any class, program, competition or other event organized, run and/or sponsored by or held by Gulf Coast Elite Cheer, hold harmless the said claims, demands, costs, expenses and compensation arising out of or in the course of or in any way related to any personal injury to me or my child.

By signing this release, I acknowledge my understanding and acceptance of the following:

1. That gymnastics/tumbling is an active sport, which requires strength, agility and concentration and that it is solely my responsibility to determine that my child is in good health and good physical and mental condition before permitting my child to exercise, work out, receive instruction or perform.
2. That gymnastics/tumbling requires twisting, turning, tumbling, jumping, flexion, extension and rotation, which movements are often performed with considerable force and/or at considerable height and which can result in severe, permanent personal injuries, including, but not limited to, bruised, strained, sprained or torn muscles, tendons and ligaments, broken bones, derangements or dislocations of joints, concussion, brain damage, nerve and spinal cord injury, paralysis and death.
3. That gymnastics/tumbling requires the use of apparatus and equipment, which may cause or contribute to severe, permanent personal injuries, such as those described above.

In the event of an accident or emergency I would like my above mentioned child to be taken to a hospital for medical treatment and I hold Gulf Coast Elite Cheer and its representatives harmless in their execution of this action. Additionally, I hereby agree to individually provide for all possible future medical expenses which may be incurred by my child as a result of any injury sustained while participating with, at or for Gulf Coast Elite Cheer.

I and participant(s) have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, and understand that I and participant(s) have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect. And I, as the minor's parent and/or legal guardian, understand the nature of the above referenced activities and the Minor's experience and capabilities and believe the minor to be qualified to participate in such activity

I have read the Release of Liability for Personal Injury and have been given the opportunity to speak with a representative of Gulf Coast Elite Cheer before signing this release.

Signature of Parent or Guardian: _____ Date: ____/____/____

No Refunds for missed classes. May make up classes when available.