



# Puma Cheer Participant Release and Waiver Form

Every participant must have a completed and signed participant release and waiver form to turn in at registration in order to participate

Athlete Name \_\_\_\_\_ Parent/Legal Guardian's Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Parent/Legal Guardian Cell Number \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

( ) Yes, you have my permission to send me updates/news from Puma Cheer

**Liability Release** As lawful consideration for being permitted to participate in an event conducted by Full Out Spirit LLC DBA Puma Cheer, I \_\_\_\_\_, as a parent or legal guardian of \_\_\_\_\_, a minor (hereinafter "Minor"), hereby grant the permission necessary to allow Minor to participate in the above event conducted by Full Out Spirit LLC DBA Puma Cheer. I, in my own behalf and on behalf of Minor, **FURTHER AGREE TO RELEASE AND TO HOLD HARMLESS PUMA CHEER, CORPORATE SPONSORS (HEREINAFTER "SPONSORS"), THE HOSTING SITE, (SCHOOL, HOTEL, GYM, CONVENTION CENTER, ATHLETIC FACILITY) ON WHOSE PREMISES THE EVENT WILL OCCUR, (HEREINAFTER THE "LOCATION") THE AFFILIATES OF PUMA CHEER, THE LOCATION, AND THE RESPECTIVE DIRECTORS, OFFICERS, REPRESENTATIVES, MEMBERS, AGENTS, AND EMPLOYEES OF PUMA CHEER, SPONSORS, THE LOCATION AND THEIR RESPECTIVE AFFILIATES (HEREINAFTER COLLECTIVELY "RELEASEES") FROM ANY AND ALL LIABILITY, WHETHER CAUSED BY THE NEGLIGENCE OR OTHER ACTS OF THE RELEASEES OR OTHERWISE FOR ANY CLAIM, JUDGMENT, LOSS, LIABILITY, COST AND EXPENSES(INCLUDING, WITHOUT LIMITATIONS, ATTORNEY'S FEES AND COST) ARISING OUT OF OR CONNECTED WITH THE EVENT, INCLUDING A CLAIM ARISING OUT OF OR CONNECTED WITH ANY ILLNESS OR INJURY (MINIMAL, SERIOUS, CATASTROPHIC, AND/OR DEATH) THAT MINOR 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 AGREE TO RELEASE AND HOLD HARMLESS RELEASEES OR ITS ASSIGNS AGAINST LOSS FROM ANY FURTHER CLAIMS, DEMANDS OR ACTIONS THAT MAY SUBSEQUENTLY BE BROUGHT BY MINOR OR BY ANY OTHER PERSON INCLUDING MINOR'S HEIRS, SUCCESSORS, ASSIGNS, EXECUTORS AND ADMINISTRATORS 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 AND LOSS OF COSTS RELEASEES MAY HAVE TO PAY AS A RESULT OF ANY SUCH ACTION, CLAIM OR DEMAND.**

I HAVE CAREFULLY READ THIS LIABILITY RELEASE IN ITS ENTIRETY AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS LIABILITY RELEASE RELEASES RELEASEES FROM LIABILITY AND CONTAINS AN ACKNOWLEDGEMENT OF MY VOLUNTARY AND KNOWING ASSUMPTION OF RISK OF INJURY OR ILLNESS. I FURTHER ACKNOWLEDGE THAT NOTHING IN THE LIABILITY RELEASE CONSTITUTES A GUARANTEE THAT THE CAMP WILL OCCUR. I HAVE SIGNED THIS DOCUMENT VOLUNTARILY AND OF MY OWN FREE WILL.

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

**PLEASE COMPLETE OTHER SIDE**

**Medical Release** I, on my own behalf and on behalf on Minor, acknowledge and agree that such participation subjects Minor to the possibility of physical illness or injury (minimal, serious, catastrophic and/or death) and that I, in my own behalf and on behalf of Minor, acknowledge that 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 PUMA CHEER TO OBTAIN THE NECESSARY MEDICAL TREATMENT OF MINOR AND HEREBY, IN MY OWN BEHALF AND ON BEHALF OF MINOR, RELEASE AND HOLD HARMLESS RELEASEES IN THE EXERCISE OF THIS AUTHORITY. I FURTHER ACKNOWLEDGE AND UNDERSTAND THAT I WILL RESPONSIBLE FOR ANY AND ALL MEDICAL AND RELATED BILLS THAT MAY BE INCURRED ON BEHALF OF 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 acknowledge that Minor suffers from the following condition: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Minor Birthdate: \_\_\_\_\_

Emergency Contact Information:

Name: \_\_\_\_\_

Address \_\_\_\_\_

Daytime Phone ( ) \_\_\_\_\_ Evening Phone ( ) \_\_\_\_\_

**WE MUST HAVE INSURANCE INFORMATION.**

Insurance Company: \_\_\_\_\_

Insurance Company Address: \_\_\_\_\_

Medical Insurance Policy Number: \_\_\_\_\_

**Appearance Agreement** I understand that Full Out Spirit LLC DBA Puma Cheer. from time to time produces promotional material relating to its program. I understand that as a participant in and/or a spectator at the Event, Minors may be included in videotapes, photographs, DVD's, Podcasts and video cast taken during the Event. Therefore, without reservations or limitations, I, on my own behalf and on behalf on the Minor, hereby assign, transfer and grant to Full Out Spirit LLC DBA Puma Cheer, its successors, assignees, licensees, sponsors, any television networks, and all other commercial exhibitors the exclusive right to photograph and/or videotape Minor to utilize such videotapes and photographs and Minor's name, face, likeness, voice and appearance as part of the Event, in advertising and promoting the Event or in advertising and promoting similar future events. I further understand that neither Puma Cheer or any third party is under any obligation to exercise any of the foregoing rights, licenses and privileges. I, in my own behalf and on behalf of the Minor, waive any right to inspect or approve any materials related thereto.

I, IN MY OWN BEHALF AND ON BEHALF OF MINOR, HAVE READ THIS PARTICIPANT RELEASE AND WAIVER FORM IN ITS ENTIRETY AND FULLY UNDERSTAND ITS CONTENT. I, IN MY OWN BEHALF AND ON BEHALF OF 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 MINOR, HAVE SIGNED THIS DOCUMENT VOLUNTARILY AND OF MY OWN FREE WILL.

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

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

I, identified above as Minor, acknowledge that I have read this Release and Waiver form.

Signature of Minor: X \_\_\_\_\_ Date \_\_\_\_\_

Witness Signature: X \_\_\_\_\_ Date \_\_\_\_\_