TSF Dance Championship Release and Waiver Form (give copy to each participant)

Minor's Name Address			Name of Parent/Legal Guardian School/Team Name
Daytime Phone			Evening Phone
parent or lega allow Minor t acknowledge physical illnes authorize You the Minor, rel members, age exercise of the my be incurre from the site f	l guardian of	F Dance Championship behalf and on behalf of serious, catastrophic an obtain necessary medic is Youth Spirit Academy Youth Spirit Academy toknowledge and under or for any illness or inj or not the Event actuall	ee to release and to hold harmless Releasees from any and all liability for
arising out of may incur or swhether or no successors, as brought by M foregoing acti	or connected with the sustained during the Event actually oc signs, executors and action or by any other pe	Event, including any cleent, all activities assocurs. I further expression diministrators against lowers on or persons on accurate to reimburse and to ma	t and expenses (including, without limitations, attorney's fees and costs) aim arising out of or connected with any illness or injury that the Minor ciated with the Event and while traveling to and from the site for the Event y agree to indemnify and hold harmless Releasees and Releasee's heirs, ses from any further claims, demand or actions that may subsequently be ount of damages of any character resulting to Minor in any way from the ke good to Releasees any loss, damages or costs Releasees may have to pay
understand the during the Eve transfer and g commercial en and Minor's mand promoting	at as a participant in ar ent. Therefore, withou rant to Youth Spirit Ac xhibitors the exclusive name, face likeness, vo g similar future events.	ad/or a spectator at the at reservation or limitat cademy, its successors, right to photograph an ice and appearance as p	Championship produces promotional material relating to this event. I Event the Minor may be included in videotapes or photographs taken ions, I, in my own behalf and on behalf of the Minor, hereby assign, assignees, licensees, sponsor, any television networks, and all other d/or videotape the Minor and to utilize such videotapes and photographs part of the Event, in advertising and promoting the Event or in advertising that neither Youth Spirit Academy nor any third party is under any and privileges.
	•	_	or is currently taking are listed below. I agree that Minor shall bring to the Event and that he/she shall consume the prescribed dosage.
Medication	as (if any):		
Allergic to	(if any):		
understand its from liability behalf and on	contents. I, in my ow and contains an ackno- the behalf of the Mind	n behalf and on behalf wledgment of my volum or, further acknowledge	rrant that I have read this Release and Waiver in its entirety and fully of the Minor, am aware that this Release and Waiver releases Releasees ntary and knowing assumption of the risk of injury or illness. I in my own that nothing in this Release and Waiver constitutes and guarantee that the Minor, have signed this document voluntarily and of my own free will.
Signature of	of Parent or Legal	Guardian:	Date:
I, identified al	bove as the Minor, ack	nowledge that I have re	ead this Release and Waiver form.
Signature o	of Minor:		Date: