



**Cheer Challenge**  
**January 26, 2008**  
**Participant Waiver/Release**

I fully understand that the World Challenge All Stars and Casperkill Country Club staff members are not physicians or medical practitioners of any kind. With the above in mind, I hereby release the World Challenge All Stars and Casperkill Country Club staff members to render temporary first aid to my child or children in the event of any injury or illness, and if deemed necessary by the World Challenge All Stars and Casperkill Country Club staff members to seek medical help including the calling of an ambulance for said child should the World Challenge All Stars and Casperkill Country Club staff members deem this to be necessary.

**Cheerleaders Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Parent or Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

We, the staff of World Challenge All Stars recognize our obligation to make our participants and their parents aware of the risks and hazards associated with the sport of cheerleading can be a high risk activity and can lead to injury!

Parents should make their children aware of the possibility of injury and encourage their children to follow all the safety rules and the coaches' instructions.

Waiver and Release: I am fully aware of and appreciate the risks, including the risk of catastrophic injury, paralysis, and even death, as well as other damages and losses associated with participation in gymnastics, tumbling and cheerleading activities and events.

I further agree that World Challenge All Stars, Challenge All Star's Booster Club and Casperkill Country Club staff members, along with the employees, agents, officers and directors of these organizations shall not be liable for any losses or damages occurring as a result of my participation in the event.

As legal parent or guardian of this athlete, I hereby verify by my signature below that I fully understand and accept each of the above conditions for permitting my child to participate in classes, events, competitions, and activities conducted by World Challenge All Stars and World Challenge All Stars Booster Club.

**Printed name of Parent/Guardian:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **ST:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Parent or Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Phone:(** \_\_\_\_\_ **)** \_\_\_\_\_

