## CheerExpo Waiver Form

Please fill out the entire form. One form must be FULLY READ and completed for/by EACH MEMBER AND COACH. The original signed copy must be remitted to CheerExpo (do not send via fax). If your child is competing on multiple teams, please remit one copy to the coach of EACH team (photocopies are permitted as long as one copy is the original).

Allergies:  Parent/Guardian Name(s):  Home Phone: (	Participants Name:			Age	: Grad	de:
Phone: (	Date of Birth (D/M/Y):	School/Clu	b/Team Name:			
Position of Participant (circle one): Coach Athlete Teacher Advisor Parent Ex-Athlete Other  Insurance Company*:	Home Address:			(Please list al	l) 	
Insurance Company*: Policy Number*: (*Required for foreign and US residents only)  REQUIRED*: Canadian Residents Only, Provincial Health Program Number (i.e. Health Card Number, OHIP, Medicare, etc):    Expiry Date:	Phone: ()(Include Area Code)	Email:				
REQUIRED*: Canadian Residents Only. Provincial Health Program Number (i.e. Health Card Number, OHIP, Medicare, etc):    Expiry Date:	Position of Participant (circle one):	Coach Athlete	e Teacher Advisor	Parent	Ex-Athlete (	Other
Medicare, etc):    Expiry Date:	Insurance Company*:(	*Required for foreig	_ Policy Number*: _ n and US residents only	<b>y</b> )		
Medical Conditions:						
Medical Conditions:  Allergies:  Parent/Guardian Name(s):  Home Phone: (	Medicare, etc):		Expi	ry Date:	(if appli	cable)
Allergies:  Parent/Guardian Name(s):  Home Phone: ()						
Parent/Guardian Name(s):    Home Phone: ()						
Home Phone: ()						
Home Phone: () (include area code)  In this activity, as in all athletic activities, there is an inherent risk of injury and/or death. I do hereby on behalf of myself and/or my child, my family and friends, release and forever discharge the event facility (venue), CheerExpo Cheerleading and Dance Events In (CheerExpo), HRM, and their respective employees, partners, members, volunteers, instructors, exhibitors, clients, contractors, directors, speakers, officers, and owners from any and all claims, demands, and causes of action for any injury to persons or proper resulting from participation in CheerExpo competitions, events, and or activities, including traveling to and/or from the event(s). I further attest and acknowledge that I/my child am/is in good medical condition and am/is physically able to participate in this event. A chaperone/adult (over the age of 21) is required to attend with participants. This chaperone will be responsible for the participants at all times including during classes. CheerExpo is not responsible for the supervision of these participants. In the event of event cancellation, CheerExpo will reimburse fees paid to CheerExpo only, and will not be held responsible for travel, accommodation or any other costs incurred as a result. I understand and consent to the fact that myself/my child may be photographed and/or videotaped at the event for CheerExpo promotional purposes.  I also understand that in the event of injury or sickness, first aid will be rendered and/or if necessary, or instructed to do so, I give permission to take myself/my child to such a place as may be necessary for proper care. I grant permission for any hospital or clinic staff members to administer immediate treatment if necessary. I further acknowledge and understand that I will be responsible for an and all medical and related bills that may result. More information about CheerExpo, including contact information, can be found at www.cheerexpo.com. CheerExpo is a division of CheerExpo Cheerleading and Dance Eve	Home Phone: ()(include area c	ode) Wo	ork/Cell Phone: (	)(includ	de area code)	
Signature: Date (D/M/Y):	Home Phone: ()  (include area of the child, my family and friends, release and for (CheerExpo), HRM, and their respective emdirectors, speakers, officers, and owners from the comparticipation in CheerExpo confurther attest and acknowledge that I/my chechaperone/adult (over the age of 21) is requall times including during classes. CheerExpo cancellation, CheerExpo will reimburse fees any other costs incurred as a result. I under videotaped at the event for CheerExpo promises in the costs incurred as a result. I under videotaped at the event for CheerExpo promises in the costs incurred as a result. I under videotaped at the event for CheerExpo promises in the costs incurred as a result. I under videotaped at the event for CheerExpo promises in the costs incurred as a result. I under videotaped at the event for CheerExpo promises in the costs incurred as a result. I under videotaped at the event for CheerExpo promises in the costs incurred as a result. I under videotaped at the event for CheerExpo promises in the costs incurred as a result. I under videotaped at the event for CheerExpo promises in the costs incurred as a result. I under videotaped at the event for CheerExpo promises in the costs incurred as a result. I under videotaped at the event for CheerExpo promises in the costs incurred as a result. I under videotaped at the event for CheerExpo promises in the costs incurred as a result. I under videotaped at the event for CheerExpo promises in the costs incurred as a result. I under videotaped at the event for CheerExpo promises in the costs incurred as a result.	woode) ere is an inherent risk rever discharge the employees, partners, more any and all claims ompetitions, events, a sild am/is in good meduired to attend with paper is not responsible as paid to CheerExpoorestand and consent to motional purposes.  or sickness, first aid was place as may be new the entire necessary. It is sult. More information	ork/Cell Phone: (	(included of hereby on be erExpo Cheerle cuctors, exhibited for any traveling to an exphysically able to will be responsible for child may be proceeded in the current of t	de area code) behalf of myself a eading and Danc ors, clients, contra y injury to person nd/or from the eve to participate in the consible for the part in the event of e r travel, accommon notographed and instructed to do s sion for any hospi at I will be respon	nd/or my ee Events Inc actors, s or property ent(s). I this event. A rticipants at event odation or or, I give tal or clinic nsible for any
Participant Signature if 18 or Over	Signature:		Da	ate (D/M/Y):		
We are leading for now and unique wanders to fill our heathel If your company is interested, contest up at info@phocrayne ast. Dataile can be found	Participant	-	r			

We are looking for new and unique vendors to fill our booths! If your company is interested, contact us at info@cheerexpo.net. Details can be found on our website at www.cheerexpo.com. Also, we are always looking for volunteers to help out during the event. If you would like to get involved, please email us at info@cheerexpo.net