

ULTIMATE CHEERLEADING FEDERATION

MEDICAL & PHOTOGRAPHY RELEASE FORM

Coaches/Sponsors: All participants and their legal guardian must complete this form.

(Please Print)

Home Phone #

Participant's Name

Parent/Guardian's Phone #

Gym/School Name

Parent or Guardian

Birthdate (mm/dd/yyyy)

Participant's Address

E-mail Address

City State Zip

Medical Insurance Company

Parent or Guardian's Address
(if different from above)

Medical Insurance Policy #

City State Zip

Emergency Contact & Phone #

List any medication to which participant is allergic, any previous medical conditions that could impair his/her performance, and any medication currently being taken.

I, the undersigned parent or legal guardian, do hereby grant permission for my son/daughter to participate with Ultimate Cheerleading Federation.

I further acknowledge and understand and agree that by participating with Ultimate Cheerleading Federation, there is a possibility of physical illness or injury (minimal, serious, and catastrophic) and that my son/daughter is assuming the risk of such injury by participating.

I authorize any representative of Ultimate Cheerleading Federation or the event party to consent and authorize any medical attention, treatment, surgery or administration of drugs by qualified and licensed medical personnel for my son/daughter which may become necessary.

I understand I will be notified as soon as possible in the event of an emergency. All expenses of such treatment will be assumed by me or my insurance company.

I agree to protect, defend, indemnify and hold harmless Ultimate Cheerleading Federation, including its owners, directors, officers, employees and sponsors from and against any and all claims, demand, losses, suits, liabilities, costs, or other damages including court costs and attorneys fees, arising from any injury to, or death of son/daughter, the undersigned, or any other persons or damage to or destruction of property arising out of or in connection with any damage to third parties occasioned by, incident to, arising out of, or in connection with my son/daughter's participation.

Appearance Clause:

I understand that Ultimate Cheerleading Federation produces promotional material about their program. I understand that my son/daughter may be included in video tape or photography taken during this event. I hereby grant Ultimate Cheerleading Federation, its successors, assignees, licensees, sponsors, any television networks and all other commercial exhibitors the exclusive right to photograph and/or video tape my son/daughter and further to utilize my son/daughter's name, face, likeness, voice and appearance as part of the event, and in advertising and promotion of the event, without reservation or limitation. In granting this license, I understand that Ultimate Cheerleading Federation is under no obligation to exercise any of its rights, licenses and privileges herein granted.

I have read and agree to the above release and appearance clause.

Participant's Signature

Parent/Guardian Signature if Participant is under 18 years of age

