

VIPERS CHEER ATHLETICS

REGISTRATION CHECKLIST:

- Registration form filled out including health card number and two emergency contacts
- Insurance waivers both signed by parent/ guardian and athlete
- Non-refundable deposit paid (\$100 for Intro & Pre-Comp, \$20 Cheer Mini's)
- Signed and initialed the bottom of this checklist to note that all components of the registration package has been completed

All is completed: _____ (Initial) _____ (Date)

Please scan and send via email to viperscheerathletics@gmail.com

or mail to: Vipers Cheer Athletics

PO Box 1491,

Almonte, Ont.

K0A1A0

For office use only:

Date registered: _____ Method deposit was paid: _____

Team placement: _____ All paperwork completed: (Y) (N)



VIPERS CHEER ATHLETICS
2018-2019 REGISTRATION FORM

Athlete's Name: _____ Age: _____

Grade: _____ Date of Birth: _____

Health Card#: _____ Shirt size: _____

Emergency contact #1

Name: _____	Relationship: _____
Address: _____	Postal code: _____
Home Phone: _____	Cell Phone: _____
E-mail: _____	

Emergency contact #2

Name: _____	Relationship: _____
Address: _____	Postal code: _____
Home Phone: _____	Cell Phone: _____
E-mail: _____	

MEDICAL:

Allergies: YES / NO

Explain: _____

Please list any other medical issues & explain (note doctors consent may be required) :

I, the undersigned parent/guardian do hereby grant permission for my son/daughter _____ to train with the VIPERS CHEER ATHLETICS. I acknowledge, understand and agree that participating in cheerleading/ training, there is the possibility of physical injury/illness and that my son/daughter is assuming risk of such injury/illness by his/her participation. In order that my son/daughter may receive the necessary medical treatment in the event of an injury/illness, I hereby authorize the staff of VIPERS CHEER ATHLETICS to facilitate medical treatment for my son/ daughter for such injury/ illness sustained during time in the gym or related events including, practices, camps or competitions. We also waive and absolve VIPERS CHEER ATHLETICS , the coaches, advisors, sponsors, parent volunteers, the staff and/ or volunteers any of the venues in which we practise or perform of any and all liability and responsibility for said injury/illness.

I authorize VIPERS CHEER ATHLETICS to use photographs and/or video recordings taken of me/my child at any cheerleading event for promotional purposes.

Parent/Guardian Signature: _____ Date: _____

READ BEFORE SIGNING

MINOR'S ACKNOWLEDGEMENT OF RISKS AND RESPONSIBILITIES

I wish to participate in the programme, related events and activities of the
Vipers Cheer Athletics.

I UNDERSTAND AND AGREE WITH THE FOLLOWING STATEMENTS:

1. The activities involved in this programme are dangerous. I risk the chance of serious injury or death through my participation.
2. My parents and I believe that I am physically, emotionally and mentally able to fully participate in this programme and as such have given their unqualified permission for me to take part.
3. I am familiar with, and will follow, all the applicable rules for participation in this programme.
4. My equipment is mechanically fit and suitable for my use in this programme.
5. I understand that at all times during my participation in this programme, I have sole responsibility for my safety.
6. If, during the course of my participation in this programme:
 - (a) I learn or become aware, of a change in my health, physical, emotional or mental condition, or
 - (b) I feel unsafe or threatened for any reason, or
 - (c) I notice anything unsafe about the programme,

I WILL IMMEDIATELY STOP PARTICIPATING and INFORM THE NEAREST OFFICIAL.

7. I am willing to accept all risk of being hurt or killed in this programme, both known and unknown, and to take full responsibility for my actions and behaviour.
8. **I HAVE READ THIS STATEMENT OF RISKS AND RESPONSIBILITIES - I UNDERSTAND AND AGREE WITH WHAT I HAVE READ - AND I CHOOSE TO SIGN IT.**

_____ **Date Signed** _____
PARTICIPANT'S SIGNATURE

PRINT NAME IN FULL: _____

SIGNATURE OF WITNESS FOR MINOR PARTICIPANT

print name of witness

READ BEFORE SIGNING

WARRANTY AND CONSENT OF PARENT/GUARDIAN

ASSUMPTION OF RISK RELEASE AND WAIVER OF LIABILITY INDEMNITY AGREEMENT

IN CONSIDERATION of allowing my minor child/ward to participate in the programme, related events and activities of the **Vipers Cheer Athletics.**

I WARRANT TO YOU THAT:

1. I am a parent/guardian having full legal responsibility for decisions regarding my minor child/ward, and
2. I am familiar with the risk of serious injury and death which any participant in this programme must assume, and
3. I believe that my minor child/ward is physically, emotionally and mentally able to participate in this programme, and that his/her equipment is mechanically fit for his/ her use in this programme, and
4. I understand, and will instruct my minor child/ward, that all applicable rules for participation must be followed and that at all times the sole responsibility for personal safety remains with my minor child/ward, and
5. I will immediately remove my minor child/ward from participation, and notify the nearest official, if at any time I sense or observe any unusual hazard or unsafe condition or if I feel that my minor child/ward has experienced any deterioration in his/her physical, emotional or mental fitness for continued participation in the programme.

I UNDERSTAND AND AGREE, ON BEHALF OF MY MINOR CHILD/WARD, MYSELF, MY HEIRS, ASSIGNS, PERSONAL REPRESENTATIVES AND NEXT OF KIN, THAT MY EXECUTION OF THIS DOCUMENT CONSTITUTES:

1. an unqualified ASSUMPTION OF ALL RISKS associated with participation in this programme by my minor child/ward even if arising from negligence, or gross negligence, including any compounding or aggravation of injuries caused by negligent rescue operations or procedures, of the programme organizer and any persons associated therewith or participating therein, and
2. a FULL AND FINAL RELEASE AND WAIVER OF LIABILITY of the programme organizer and all persons and organizations associated with it and the programme including, without limiting the generality of the foregoing, its officers, directors, officials, agents and/or employees, other participants, sponsors, advertisers, owners and/ or lessors of the premises used to conduct the programme, sanctioning bodies, medical or rescue personnel (the RELEASEES), of and from with the respect to all injury, disability, death or loss or damage to person or property whether arising from the negligence, or negligent rescue of or by the foregoing or otherwise, and
3. an UNDERSTANDING NOT TO SUE the RELEASEES for any loss, injury, costs or damages of any form or type, howsoever caused or arising, and whether directly or indirectly from the participation of my minor child/ward in the programme, and
4. an AGREEMENT TO INDEMNIFY, and to SAVE and HOLD HARMLESS the RELEASEES, and each of them, from any litigation expense, legal fees, liability, damage, award or cost, of any form or type whatsoever, they may incur due to any claim made against them or any one of them whether the claim is based on the negligence or the gross negligence of the RELEASEES or otherwise.

I HAVE READ THIS DOCUMENT THOROUGHLY.

I UNDERSTAND THAT THE RELEASEES ARE RELYING UPON MY WARRANTIES, ASSUMPTIONS, WAIVER AND RELEASE, UNDERTAKINGS AND AGREEMENTS WHEN ACCEPTING MY MINOR CHILD'S/WARD'S PARTICIPATION IN THIS PROGRAMME.

I UNDERSTAND THAT BY SIGNING THIS DOCUMENT I GIVE UP SUBSTANTIAL LEGAL RIGHTS I AND/ OR MY MINOR CHILD/WARD WOULD OTHERWISE HAVE.

I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT INDUCEMENT.

SIGNATURE OF PARENT/GUARDIAN

printed name of parent/guardian

SIGNATURE OF WITNESS

printed name of witness

DATE

AGE OF MINOR

Selecting your payment type:

- I choose to pay by (cheque (preferred), EMT or Paypal *an additional \$50 will be due for all payments paid via Paypal) :
_____. _____ (Initial)
- I understand that if I miss these deadlines without speaking to the owner, I am subject to pay an additional fee of \$20 total amount outstanding. _____(Initial)
- I understand that any NSF cheques will be subject to an additional \$30 charge and personal cheques will no longer be accepted from Vipers Cheer Athletics. _____(Initial)