

Titans Cheer Camp April 10-April 11 Registration card

Titans is a program operating under the corporate name of Elite Sports Academy & Fitness Inc. Pre-Register (Pre-Paid) \$50 _____ Day of camp \$60 _____

NAME (full) _____ DOB _____ AGE _____

ADDRESS _____ City _____ zip _____

HOME PHONE _____ CELL _____

*Does student have any health concerns/conditions? Yes ___ No ___
-If yes, please explain on back of card with Doctor's name included.

*Emergency Contact—Name _____ Number _____

PARENT/GUARDIAN _____ / _____

EMAIL _____ @ _____

PERMISSION TO TREAT STATEMENT (please read carefully)

I _____ being the parent/legal guardian of _____ do hereby grant permission to treat or render first aid to my child/children in the event of any injury or illness, and if deemed necessary, to call for EMS for which I agree to pay.

As the parent/legal guardian of the student listed above, I agree to provide health insurance for the student listed and/or guarantee payment of any medical expenses incurred as a result of training, performing, traveling, or participation in activities at Titans Cheer Camp/Elite Sports Academy & Fitness. I understand it is my responsibility to seek physician approval before my child engages in any physical/athletic activities with Titans Cheer Camp/Elite Sports Academy & Fitness.

SIGNATURE OF PARENT/LEGAL GUARDIAN _____

Release of liability, waiver of liability, assumption of full responsibility for all risk of bodily injury, death or damages

*****Please read carefully all conditions listed below.**

As a parent/legal guardian or legal age individual (Student's name) _____,

I hereby consent to his/her/my participation in any or all activities with Elite Sports Academy & Fitness Inc. (Hereinafter ESA&F Titans) as well as his/her/my participation in the following, but not limited to, classes, practices, cheerleading, tumbling, dance, and travel. I understand that participation in tumbling, cheerleading, trampolining, gymnastics, dance and any and all other activities with ESA&F / Titans may result in injuries such as paralysis or even death from various causes, known and unknown, which include but are not limited to, the heights from the equipment and the body during certain movements, rotation of the body and movement of the body.

I am fully aware of the inherent risk involved in tumbling, cheerleading, trampolining, gymnastics, dance and any and all other activities with ESA&F / Titans, and the possibility of injury or death from participating in these activities.

In consideration for allowing my child/self to participate in activities with ESA&F / Titans, I, my heirs and assigns, next of kin, and all other acting on my behalf agree to waive any and all rights, claim, damages, actions, cause of action or suits of any kind or nature whatsoever which I have or my child has against ESA&F / Titans or any agent, employee, representative acting on their behalf and to indemnify, defend, and hold harmless ESA&F / Titans any agent, employee, representative, or other person acting on their behalf, from liability of ordinary negligent conduct which may occur.

Should any part or parts of this agreement be null and void, the balance of the agreement shall remain valid and maintain its full force and effect.

This acknowledgement of risk and waiver of liability has been read by me in its entirety, and I understand and agree to it in its entirety as well as have signed it voluntarily. I am eighteen years of age or older

Parent/Guardian Signature _____ Date _____