

**ELITE HEAT ALL STARS**  
**MEMBER INFORMATION**  
2013- 2014



Athlete Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Athlete Email: \_\_\_\_\_

Home Phone: (     ) \_\_\_\_\_ Athlete Cell Phone: (     ) \_\_\_\_\_

Mothers Name: \_\_\_\_\_ Cell Phone: (     ) \_\_\_\_\_

Fathers Name: \_\_\_\_\_ Cell Phone: (     ) \_\_\_\_\_

Parent Email: \_\_\_\_\_

Emergency Contact:

1. \_\_\_\_\_ Cell Phone: (     ) \_\_\_\_\_

2. \_\_\_\_\_ Cell Phone: (     ) \_\_\_\_\_

Please list any Allergies:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any medications:

\_\_\_\_\_  
\_\_\_\_\_

Photo Release: I give my permission to have any pictures or videos of my child used on our website and or promotional materials.

I\We the undersigned hereby certify that I (we) are the parent or guardian of the child. I hereby give permission for the staff of Elite Heat All Star Cheerleading, to seek appropriate medical treatment for my child in the event of accident, injury, or illness. I (we) will be responsible for any and all costs of medical treatment.

Preferred Hospital: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this form with the medical release and payment of \$25.00 to:

Elite Heat All Stars  
179 New Road  
East Amherst, NY 14051

*Checks should be made payable to Elite Heat All Stars*

## ELITE HEAT ALL STARS MEDICAL RELEASE

In consideration of the services of ELITE HEAT ALL-STAR CHEERLEADING, its owners, agents, officers, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "Elite Heat"), I hereby agree to release, discharge, and hold harmless ELITE HEAT on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estates as follows:

1. I understand and acknowledge that the activities that I or my child engage in while on the premises or under the auspices of ELITE HEAT pose known and unknown risks which could result in injury, paralysis, death, emotional distress, or damage to me, my child, to property, or to third parties. The following describes some, but not all of those risks:

Cheerleading and gymnastics, including performances of stunts and use of trampolines, entail certain risks that simply cannot be eliminated without jeopardizing the essential qualities of the activity. Without a certain degree of risk, cheerleading students would not improve their skills and the enjoyment of the sport would be diminished. Cheerleading and gymnastics expose participants to the usual risk of cuts and bruises, and other more serious risks as well. Participants often fall, sprain or break wrists and ankles, and can suffer more serious injuries. Traveling to and from shows, meets and exhibitions, raises the possibilities of any manner of transportation accidents. In any event, if you or your child is injured, medical assistance may be required which you must pay for yourself.

2. I expressly agree and promise to accept and assume all of the risks, known and unknown, connected with ELITE HEAT related activities, including but not limited to performance of stunts and the use of trampolines. My participation and that of my child is purely voluntary. No one has forced or coerced me or my child to participate. I elect for myself and my children to participate in such activities in spite of the risks.

3. I hereby voluntarily release, forever discharge, and agree to hold harmless and indemnify ELITE HEAT from any and all liability, claims, demands, actions or rights of action, which are related to, arise out of, or are in any way connected with my child's participation in ELITE HEAT-related activities.

4. Should ELITE HEAT be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and reimburse them for such fees and costs.

5. I certify that my child has health, accident and liability insurance to cover bodily injury or property damage that may be caused or suffered while participating in this event or activity, or else I agree to bear the costs of such injury or damage to my child. I further certify that I am willing to assume and bear the costs of all risks that may arise or be created, directly or indirectly, through or by any such condition.

6. In the event that I file lawsuit against ELITE HEAT, I agree to do so solely in the State of New York and I further agree that the substantive and procedural laws in that state shall apply in any such action without regard to the conflict of laws rules thereof. I agree that if any portion of this agreement is found void or unenforceable, the remaining portions shall remain in full force and effect.

7. By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation or the participation of any of my children in this activity, I may be found by court of law to release ELITE HEAT by signing this Agreement.

I have had the sufficient opportunity to read this entire document. I have read it and understand it.

I agree to be bound by its terms.

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Parent's or Guardian's Additional indemnification. (Must be completed if participant under the age of 18).

In consideration of \_\_\_\_\_ (print minor's name)  
("Minor") being permitted by ELITE HEAT to participate in its activities