



CJ's Cheerleader

This completed form is mandatory for the participation in anything the CJ's Cheerleaders are involved with Please read carefully and sign where indicated.

Cheerleaders Name.....

Full Address.....

.....

In case of emergency, notify Phone.....

Or..... Phone.....

Vigorous Activity: As part of the CJs Squad you will be participating and being involved in a vigorous athletic activity which will include stunts, mounts, gymnastics, jumps and dance. Due to the nature of the activity we wish to inform you that the possibility of injury does exist as with any other athletic activity. All reasonable care will be taken by the club and staff.

Medical Issues: If there are any special medical considerations that club staff should be aware of these should be notified in writing to the club. Medications that may be required by your child must be supplied in a sealed bag with their name on, with specific authorization given to the club on giving such medication.

Photographic consent: CJ's may take part in BCA authorized competitions where BCA approved and CRB cleared photographers and video crew will be photographing and videoing routines. I give consent for my child to be photographed/videoed if the occasion arises (Please circle) YES or NO.

Cheerleader representation: I agree to co operate with the coach and squad officials and will follow the instructions and rules in accordance with their directions. I understand that failure to obey the rules and instructions of the coach and squad officials may result in my dismissal and discharge from the squad without reimbursement of fees. As a cheerleader I understand that I am free to withdraw my participation upon request and at my own free will without coercion, duress or intimidation of any sort.

Cheerleaders signature..... Date.....

Parental consent: I/ We authorise the coach or squad officials of the CJ's Cheerleading squad to seek treatment for any injury occurred by my child whilst cheerleading and also authorise the doctor and/ or hospital nearby to perform treatment to any injury.

I/ We have read the above and understand the risk of vigorous athletic activity. Our child is in good health and physically capable of participating as part of the CJ's Cheerleading squad.

Parent/ Guardians signature..... Date.....

If the Cheerleader is over 18 years of age parents signature N/A