



WCC Cheer LLC./58 Dalton Ave./SI, NY 10306/646-220-9220/Danicheer64@msn.com

WCC Cheer LLC. Consent and Acknowledgement

I/We _____ parent's/guardian's of _____ who is a member in the WCC *Cheer Program* and wishes to participate as a cheerleader in this program; give our full consent for such participation by our child. We understand that our child must be in good physical shape and condition and that the activities which our child will participate in are strenuous and require athletic and physical agility. It has been fully explained to me/us that these activities include, but are not limited to a variety of gymnastics routines including; somersaults, back hand springs, tucks, round offs, rolls, and others; that there will be a variety of mounts and stunts requiring the coordination of more than one participant of the squad; that these activities will not be confined to any one site or venue, but rather a variety of sites and places throughout this program's cheer season.

It has also been explained to us that cheerleading is an activity in which the risk of injury is high; that any one of these routines involving our child's participation in general, can lead to serious injury including partial or total paralysis, or even death. We have also discussed this with our child and among ourselves. Despite this understanding and the risks involved, we still consent to the participation in this activity by our child.

We also understand that our child will be required to travel to locations other than their primary practice location, and consent to providing transportation for our child via; ourselves, a team or practice center bus or vehicle (when offered), or a team parent or member. We consent to these forms of transportation.

We represent to you that, to the best of our knowledge and belief, our child has no mental, physical, or medical disability or limitation that would restrict our child's ability to fully participate in all facets of cheerleading in this program. We have been informed that our child must be examined by a physician prior to full participation in these activities described above and we agree to such examination via our licensed medical physician to preliminarily qualify our child in this activity.

We agree to, and by the signing of this agreement, release: the director(s)/owner, coaches, assistant coaches, volunteer staff, of the WCC Cheer Program; **in addition to the facilities utilized by WCC Cheer and the facility's staffs and owners**, from any claim of negligence by: ourselves, our child, our heirs, executors and assigns; from any liability arising from claims for damages for injury, to our child, and any claims for loss of or damage to our child's property which may arise out of our child's participation in the WCC Cheer Program for as long as our child is a participant.

In witness whereof, I/we have affixed our signatures to this agreement the _____ day of _____ in the year _____ for the WCC Cheer Program, Staten Island, New York.

Parent's/Guardian's Signature

Date

Parent's/Guardian's Signature

Date

