PARTICIPATION RELEASE

I hereby represent that I am the parent or legal guardian of _____ (the "Athlete").

I hereby acknowledge that (I) I am familiar with the physical and otherwise athletic nature of cheerleading and all activities related thereto, including without limitation; jumping tumbling, building of partner stunts and pyramids, dancing and other activities related thereto (collectively, "Cheerleading Activities"), and (ii) in connection with the athletes acceptance as a athlete or member of PRO SPIRIT, inc., the Athlete will be participating in Cheerleading Activities during classes, practices, performances and competitions, in a variety of locations, settings and venues.

In consideration of the acceptance of the Athlete as a athlete or member of PRO SPIRIT, inc., in my capacity as the parent or legal guardian of the Athlete, I on behalf of myself and the Athlete, hereby consent to the Athlete's participation in the Cheerleading Activities and hereby release and hold harmless PRO SPIRIT, inc., its principles, partners, members, managers, employees, officers, contractors, consultants, advisors, volunteers and agents from any and all actions, causes of action, damages, liabilities and claims, relating to or in connection with the Athlete's participation in Cheerleading Activities, including without limitation, actions, causes of action, damages, liabilities and claims relating to bodily injury.

I hereby authorize PRO SPIRIT, inc Personnel to render judgment concerning first aid or other medical assistance with respect to the Athlete in the event the Athlete's injury or illness, during my absence. I hereby authorize the PRO SPIRIT, inc. Personnel to perform simple first aid on the Athlete if deemed necessary of advisable in the discretion of the PRO SPIRIT, inc. Personnel, during my absence.

I hereby represent that the Athlete is in good health and physically able to participate in Cheerleading Activities and that the Athlete is and will continue to be covered by sufficient insurance to cover costs and expenses of injuries the occurrence of which are reasonably foreseeable from the Athlete's participation in Cheerleading Activities.

For any calendar month in which the athlete is enrolled as an athlete or member of PRO SPIRIT, inc. I shall pay the tuition and fees required by PRO SPIRIT, inc. in connection with the Athlete's enrollment as a athlete or member of PRO SPIRIT, inc. in accordance with the rules and regulations of PRO SPIRIT, inc. as established from time to time. Each installment of tuition, fees and dues shall be due and payable on the first day of class each calendar month in which the athlete is so enrolled (except in the case of the Athlete's initial enrollment which occurs on a day other that the first day of the month, in which case, such initial installment of tuition and fees shall be due on the day of such initial enrollment). A late fee of the amount of ten dollars shall be due and payable for each installment of tuition or fees not paid by the seventh day of that calendar month.

Executed this _____ day of _____, 20 _____ by _____

(Signature of Parent or Legal Guardian)

Individuals to contact in case of emergency:

Primary Contact	_____	Secondary Contact	_____
Phone	_____	Phone	_____
Alt Phone	_____	Alt Phone	_____

Registration Date _____/_____/_____

ATHLETE INFORMATION

Last Name		First Name	
Age		Date of Birth	
Athlete's Phone		Athlete's Email	
Parent's Name			
Address			
City, ST. ZIP			
Home Phone		Cell Phone	
Work Phone		Parent's Email	

PERMISSION FOR MEDICAL TREATMENT

I, _____ (print) authorize the necessary steps regarding medical attention (i.e. First aid, calling ambulance service, transportation to the hospital and to be admitted to the hospital)) and will allow authorized hospital faculty and staff to treat my child for any illness or injury he or she has.

Athlete's Name		Date	
Parent's Name		Phone	
Parent's Signature			

Doctor's Name	
Insurance Comp.	
Policy Number	
Hospital Pref.	

Physical / Mental Conditions we should be aware of:

_____

_____

_____