



Medical Information / Athletic Waiver & Release

Date _____ Student First Name _____ Student Last Name _____

Student D.O.B. _____ Gender M / F Parent Name _____

Address _____
Street City State Zip Code

Phone _____ Cell _____ Email _____

Who should be called in case of an emergency?

Name _____ Relation _____ Phone _____ Alt. Phone _____
Name _____ Relation _____ Phone _____ Alt. Phone _____
Doctor's Name _____ Address _____ Phone _____
Medical Insurance Co. _____ Group Number _____ Phone _____
Preferred Hospital _____

Please answer the following about your child. If you answer "Yes," please describe briefly.

Previous gymnastics experience? No Yes _____
Previous cheerleading experience? No Yes _____
Allergies or intolerance to food or medication? No Yes _____
Medications currently being taken? No Yes _____
Previous injuries or illnesses? No Yes _____
Restrictions or special considerations? No Yes _____
Permission for non-prescription medications? No Yes _____
(Ibuprofen, throat lozenges, cough syrup)

I fully understand that Tri-County Gymnastics & Cheer, LLC staff members are not physicians or medical practitioners of any kind. With the above in mind, I hereby release the Tri-County Gymnastics & Cheer, LLC staff to render first aid to my child in the event of any injury or illness, and if deemed necessary by the Tri-County Gymnastics & Cheer, LLC staff to call our doctor and to seek medical help, including transportation by a Tri-County Gymnastics & Cheer, LLC staff member or its representatives, whether paid or volunteer, to any health care facility or hospital, or the calling of an ambulance for said child should the Tri-County Gymnastics & Cheer, LLC staff deem this to be necessary.

Parent or Guardian _____ Signature _____ Date _____
Please print clearly

The staff of Tri-County Gymnastics & Cheer, LLC recognizes its obligation to make students and their parents aware of the risks and hazards associated with the sport of gymnastics, trampoline, tumbling, cheerleading, dance, warrior ninja and camps. Gymnastics, trampoline, tumbling, cheerleading, dance and camps can be dangerous and can lead to injury. Students may suffer injuries, possibly minor, serious, or catastrophic in nature.

Parents should make their children aware of the possibility of injury and encourage their children to follow all the safety rules and the coaches' instructions. Tri-County Gymnastics & Cheer, LLC, its coaches, and other staff members will not accept responsibility for injuries sustained by any student during the course of gymnastics, trampoline, tumbling, cheerleading, dance, warrior ninja and camp instruction, or open workouts or in the case of any exhibition, competition, or clinic in which he or she may participate while traveling to or from the event. With the above in mind, and being fully aware of the risks and possibility on injury involved, I consent to have my child or children participate in the programs offered by Tri-County Gymnastics & Cheer, LLC. I, my executors, or other representatives, waive and release all rights and claims for damages that I or my child may have against Tri-County Gymnastics & Cheer, LLC and/or its representatives whether paid or volunteer. I also affirm that I now have and will continue to provide proper hospitalization, health, and accident insurance coverage which I consider adequate for both my child's protection and my own protection. I also understand that it is the parents' responsibility to warn the child about the dangers of gymnastics, cheerleading, and injury. The parent should warn the child according to what the parent feels is appropriate. Tri-County Gymnastics & Cheer, LLC will only warn the child through "safety messages" and our teaching style and progressions.

Parent or Guardian _____ Signature _____ Date _____
Please print clearly