

Today's Date: \_\_\_\_\_

**CELINA GYM CHEER LLC**

**2017**

712 E. Wayne Street  
Celina, OH 45822  
419-586-4400

**REGISTRATION FORM**

MOTHER: _____	Last Name: _____	Phone: _____	text? Y N
FATHER: _____	Last Name: _____	Phone: _____	text? Y N
OTHER: _____	Last Name: _____	Phone: _____	text? Y N

Home Address: Street # and Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

In case of Emergency and a parent can not be reached:

1st PERSON-NAME: \_\_\_\_\_ NUMBER \_\_\_\_\_ TEXTING? YES NO

2nd PERSON-NAME: \_\_\_\_\_ NUMBER \_\_\_\_\_ TEXTING? YES NO

E-Mail Address(s) \_\_\_\_\_

Person Responsible for paying account at Celina Gym & Cheer:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**CHILD INFO**

First: \_\_\_\_\_ Last: \_\_\_\_\_  
 Birth Date: \_\_\_\_\_  
 Age: \_\_\_\_\_ Circle: Female Male  
 Athlete Cell # : \_\_\_\_\_ Resides with: \_\_\_\_\_

Any intolerance to drugs and medication? \_\_\_\_\_

Any previous illness, conditions, or injury we should be aware of? \_\_\_\_\_

**CHILD INFO**

First: \_\_\_\_\_ Last: \_\_\_\_\_  
 Birth Date: \_\_\_\_\_  
 Age: \_\_\_\_\_ Circle: Female Male  
 Athlete Cell # : \_\_\_\_\_ Resides with: \_\_\_\_\_

Any intolerance to drugs and medication? \_\_\_\_\_

Any previous illness, conditions, or injury we should be aware of? \_\_\_\_\_

**CHILD INFO**

First: \_\_\_\_\_ Last: \_\_\_\_\_  
 Birth Date: \_\_\_\_\_  
 Age: \_\_\_\_\_ Circle: Female Male  
 Athlete Cell # : \_\_\_\_\_ Resides with: \_\_\_\_\_

Any intolerance to drugs and medication? \_\_\_\_\_

Any previous illness, conditions, or injury we should be aware of? \_\_\_\_\_

**BE SURE TO READ AND SIGN THE BACK OF THIS SHEET**

**Liability Release:** For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, I, \_\_\_\_\_, as parent or legal guardian of \_\_\_\_\_, a minor (hereinafter "Minor"), hereby grant the permission necessary to allow Minor to participate in Athletic and Related Activities (hereinafter "Activities"), to be conducted by Celina Gym & Cheer LLC. I, in my own behalf and on behalf of Minor, further agree to release and to hold harmless Celina Gym & Cheer LLC on whose premises the activities will occur (hereinafter "Location") the affiliates of Celina Gym & Cheer LLC and the Location, and the respective directors, officers, representatives, members, agents and employees of Celina Gym & Cheer LLC, the Location and their respective affiliates, (hereinafter collectively "Releasees") from any and all liability whether caused by negligence of the Releasees or otherwise for any claim, judgment, loss, liability, cost and expenses (including, without limitations, attorney's fees and costs) arising out of or connected with the Activities, including any claim arising out of or connected with any illness or injury (minimal, serious, catastrophic and/or death) Minor may incur or sustain during the Activities and while traveling to and from the Location whether or not the Activities actually occur. I further expressly agree to indemnify and hold harmless Releasees and Releasees's heirs, successors, assigns, executors and administrators against loss from any further claims, demands or actions that may subsequently be brought by Minor or by any other persons on the account of damages of any character resulting to Minor in any way from the foregoing Activities. I further agree to reimburse and to make good to Releasees any loss or costs Releasees may have to pay as a result of such action, claim, or demand.

I, in my own behalf and on behalf of Minor, hereby warrant that I have read this Liability Release in its entirety and fully understand its contents. I, in my own behalf and on behalf of Minor, am aware this Liability Release releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I, in my own behalf and on behalf of Minor, further acknowledge that nothing in this Liability Release constitutes a guarantee that the Activities occur. I, in my own behalf and on behalf of Minor, have signed this document voluntarily and of my own free will.

**Medical Release:** I, in my own behalf and on behalf of Minor, acknowledge and agree that such participation subjects Minor to possibility of physical illness or injury (minimal, serious, catastrophic and/or death) and that I, in my own behalf and on behalf of Minor, acknowledge that Minor is assuming the risk of such illness or injury by participating in the Activities. In the event of such illness or injury, I authorize Celina Gym & Cheer LLC to obtain necessary medical treatment of Minor and hereby, in my own behalf and on behalf of Minor, release and hold harmless REleasees in the exercises of this authority. I further acknowledge and understand that I will be responsible for any and all medical and related bills that may be incurred on behalf of Minor for any illness or injury that Minor may sustain during the Activities and while traveling to and from the site for the Camp whether or not the Camp actually occurs.

Signature of Parent or Legal Guardian:      x \_\_\_\_\_ Date: \_\_\_\_\_

**Do you have insurance?**                      YES              NO

**If YES Please list Insurance Company Name** \_\_\_\_\_

**Appearance Agreement:** I understand that Celina Gym & Cheer LLC from time to time produce promotional material relating to its programs. I understand as a participant and/or a spectator, that Minor may be included in videotapes or photographs taken during the Activities. Therefore, without reservation or limitations, I, in my own behalf and on behalf of Minor, hereby assign, transfer and grant to Celina Gym & Cheer LLC, its successors, assigns, licensees, sponsors, any television networks, and all other commercial exhibitors the exclusive right to photograph and/or videotape Minor and to utilize such videotapes and photographs and Minor's name, face likeness, voice and appearance as part of the Activities, in advertising and promoting the Activities or advertising and promoting similar Activities. This may include but not limited to, the internet, facebook, bulletin boards, etc.

Signature of Parent or Legal Guardian:      x \_\_\_\_\_ Date: \_\_\_\_\_