



# TEAM WAIVER FORM

ROCKSTARCHAMPIONSHIPS – LIABILITY RELEASE FORM WARNING! CHEERLEADING & TUMBLING CAN BE DANGEROUS SPORTS EVEN UNDER THE MOST CAREFUL INSTRUCTION. INJURIES CAN HAPPEN. INCLUDING PARALYSIS & DEATH. PLEASE READ THIS RELEASE CAREFULLY BEFORE SIGNING. FOR AND IN CONSIDERATION of the provision of cheerleading/tumbling training services, and for other good and valuable consideration, the receipt of which is hereby acknowledged, I, SIGN BELOW parent/legal guardian of SIGN BELOW, a minor/s, do hereby release, remise, acquit and forever discharge Rockstar Championships, David R. Owens, Kristin Owens, their corporate officers, agents, servants, and employees, of and from any and all actions, causes of action, claims, demands, costs, loss of services, medical expenses, and damages of any kind or character on account of, or in any way growing out of any and all injuries to the above named minor, whether now existing or occurring in the future, as a result of or related to any cheerleading/tumbling training or related services provided by the Releasees or upon their property. I expressly agree and understand that Releasees are hereby released from any injuries or damages of any nature, no matter how caused, which may occur to the above named minor, including injuries or damages sustained as a result of the sole negligence of Releasees or any one of them. I hereby declare and represent that in making this Release, it is understood and agreed that I rely wholly upon my own judgement, belief, and knowledge, and that I have not been influenced to any extent whatever in making this Release by any representation or statements made by the persons, firms, or corporations who are hereby released, or by any person or persons representing him, her, or them. It is further understood and agreed that all medical bills for care and treatment of the above named minor in the event of any injury will be my sole responsibility and that I hereby agree to hold Releasees and their corporate officers, agents, servants, and employees harmless and indemnify them of and from any claims and demands, made by any party, whether by and on behalf of the above named minor or not, for medical bills and/or expenses arising from any injury to the above named minor. This Release contains THE ENTIRE AGREEMENT between the parties hereto and the terms of this RELEASE are contractual and not a mere recital. I FURTHER STATE THAT I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF, AND SIGN THE SAME AS MY OWN FREE ACT.

## INSTRUCTIONS

1. List each team member on the "Team Waiver Form"
2. Fill out each line completely including all information and signatures. Participants who are 18 years of age or older should list their name on the participant and can sign their own name the parent/guardian line.
3. Team Waiver Forms must be received at least two weeks prior to the event. Mail completed form to RockStar Championship at 6704 Edgewater Drive, OKC, OK 73116 or e-mail to David@RockstarChampionships.com

## TEAM INFORMATION

Team Name/Entry Name: \_\_\_\_\_  
 City/State: \_\_\_\_\_  
 Name of RockStar Event(s): \_\_\_\_\_  
 Division Name: \_\_\_\_\_  
 USASF Level: \_\_\_\_\_

|     | Name of Participant | Age | Birthdate | Signature of Parent/Legal Guardian | Date |
|-----|---------------------|-----|-----------|------------------------------------|------|
| 1.  |                     |     |           |                                    |      |
| 2.  |                     |     |           |                                    |      |
| 3.  |                     |     |           |                                    |      |
| 4.  |                     |     |           |                                    |      |
| 5.  |                     |     |           |                                    |      |
| 6.  |                     |     |           |                                    |      |
| 7.  |                     |     |           |                                    |      |
| 8.  |                     |     |           |                                    |      |
| 9.  |                     |     |           |                                    |      |
| 10. |                     |     |           |                                    |      |

|     | Name of Participant | Age | Birthdate | Signature of Parent/Legal Guardian | Date |
|-----|---------------------|-----|-----------|------------------------------------|------|
| 11. |                     |     |           |                                    |      |
| 12. |                     |     |           |                                    |      |
| 13. |                     |     |           |                                    |      |
| 14. |                     |     |           |                                    |      |
| 15. |                     |     |           |                                    |      |
| 16. |                     |     |           |                                    |      |
| 17. |                     |     |           |                                    |      |
| 18. |                     |     |           |                                    |      |
| 19. |                     |     |           |                                    |      |
| 20. |                     |     |           |                                    |      |
| 21. |                     |     |           |                                    |      |
| 22. |                     |     |           |                                    |      |
| 23. |                     |     |           |                                    |      |
| 24. |                     |     |           |                                    |      |
| 25. |                     |     |           |                                    |      |
| 26. |                     |     |           |                                    |      |
| 27. |                     |     |           |                                    |      |
| 28. |                     |     |           |                                    |      |
| 29. |                     |     |           |                                    |      |
| 30. |                     |     |           |                                    |      |

**If you have more than 30** members on this team, please duplicate this form as necessary.