

**VICTORY CHEER & DANCE  
AUTHORIZATION / RELEASE FORM**

**STUDENT NAME:**

\_\_\_\_\_  
(LAST)

\_\_\_\_\_  
(FIRST)

Home Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

(Mother/Guardian) \_\_\_\_\_

Work Phone: \_\_\_\_\_

(Father/Guardian) \_\_\_\_\_

Birthday: \_\_\_\_\_

Address: \_\_\_\_\_

Student Cell: \_\_\_\_\_

(Street)

Parent Cell: \_\_\_\_\_

(City)

(State)

(Zip)

DRIVER LICENS# \_\_\_\_\_ STATE \_\_\_\_\_

**EMERGENCY CONTACT**

INSURANCE COMPANY / POLICY# \_\_\_\_\_

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

\_\_\_\_\_

Phone #: \_\_\_\_\_ Cell# \_\_\_\_\_

\_\_\_\_\_

(Address)

(Phone #)

Are there any MEDICAL CONDITIONS that we need to be aware of?

Please list any physical limitations, injuries, or weakness that may affect the student:

I authorize Victory Cheer & Dance and its representatives to consent to medical treatment for my child when I cannot be reached to so consent. I also understand that first aid will be rendered and/or if necessary or instructed to do so, give my permission to take my child to such place as may be necessary for the proper care. I grant permission to any hospital or clinic staff member to administer immediate treatment if necessary and accept financial responsibility for all services rendered. As in all athletic activities, there is an inherent risk of injury. I do hereby on behalf of myself and my child, release and forever discharge Victory Cheer & Dance, Ramiro Medrano, David Fincher, Callie Fincher, Darlene Jones and Columbia Texas PP Industrial LP or any entity forward by the aforementioned individuals from any and all claims, demands, and causes of action for injury to persons or property arising from participation in Victory Cheer & Dance instruction, practices, performances and/or activities. I further attest and acknowledge that my child is in good health and condition and is physically able to participate.

I accept financial responsibility for instructional classes, privates, choreography and/or all-star monthly tuition fees. I understand the all-star program is an eleven month commitment. All fees paid associated with the all-star program are non-refundable. If my child participates in the all-star program, I accept and agree with the terms and provisions stated in the all-star handbook and agree to be financially responsible for all-star expenses, including, but not limited to, tuition, uniform costs, competition and/or activity fees and miscellaneous all-star expenses.

I hereby give my permission for my child to participate in Victory Cheer & Dance instructional and/or all-star programs.

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**PARENT / GUARDIAN SIGNATURE**