

# Pioneer cheer camp

200 HIGH STREET  
GLENVILLE, WV 26351  
304-462-4111  
fscnatlchamp@aol.com

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
School/Team Name: \_\_\_\_\_  
Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
Parent/Guardian Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
In case of emergency, notify: \_\_\_\_\_ Phone: \_\_\_\_\_

The following must be read and signed by the parent or legal guardian of all minor students or by the student if of legal age.

## **Acknowledgement of Risk, & Medical Authorization**

**STATEMENT OF HEALTH:** Please state if your child is under treatment for any medical condition.

Medical Treatment: \_\_\_\_\_  
Medications Taken: \_\_\_\_\_  
List any allergies: \_\_\_\_\_

**PARENTAL CONSENT:** I recognize the potential for severe injuries, including but not limited to permanent paralysis or death can occur in sports or activities involving height or motion, including but not limited to tumbling, jumping, stunting and cheerleading. Being fully aware of these dangers, I voluntarily consent to the aforementioned child participating in the Pioneer Cheer camp for any and all programs and activities and accept all risks associated with full participation. I will make my child aware of the possibility of injury and encourage my child to follow all safety rules and their coaches' instructions. I understand the possibility of injury exists and my signature on this form releases Glenville State College/Pioneer Cheer Camp, the event host, staff, or sponsors from any liability in the event that an injury occurs.

**FINANCIAL OBLIGATION:** All Payments must be made before the aforementioned child is permitted to participate in the Pioneer Cheer Camp.

**WITHDRAWAL POLICY:** If your child decides not to finish the 10 am to 2 pm camp, you will not be entitled to any refund.

**MEDIA RELEASE:** Glenville State College has my consent to use photographs or videotapes to promote GSC, Pioneer Cheer Camp or GSC Cheerleading, it services and merchandise for the above named person.

**PARENT/GUARDIAN SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**HEALTH INSURANCE CARRIER:** \_\_\_\_\_ **POLICY #:** \_\_\_\_\_

**PIONEER CHEER CAMP!!**  
Hosted by:  
Glenville State College Cheerleaders