



Saugus High School Cheer Clinic Waiver and Release Form
Cheer Clinic Sunday, September 10, 2023 and
Game Performance Thursday, September 14, 2023

IMPORTANT: THIS IS A WAIVER AND RELEASE OF POTENTIAL LEGAL CLAIMS FOR PERSONAL INJURY AND PROPERTY DAMAGE. PLEASE READ THIS DOCUMENT CAREFULLY.

In consideration of Saugus High School granting the permission to participate in the Saugus High School Cheer Clinic, I hereby assume all responsibility for and risk of bodily injury, death, or property damage that may result from Saugus Cheer Clinic. As parent/guardian, I do hereby release the William S. Hart Union High School District, The Saugus High School Cheer Booster Association, Saugus High School, and their officers, employees, agents, coaches, and all participates in said Saugus Cheer Clinic from all liability, including claims and suits at law or inequity, for injury which may result from the student taking part in the Saugus High School Cheer Clinic and Game Performance.

Signature of Parent/Guardian: _____

Date: _____ Parent/Guardian Phone Number: _____

HEALTH STATEMENT / MEDICAL AUTHORIZATION

I do hereby affirm that the applicant is in good health and suffers from no illness, disability or condition that requires the taking of medication on a regular basis unless that condition is disclosed and approved. Furthermore, I have no knowledge of any reason that the applicant cannot participate in vigorous activity. I hereby authorize and give my consent to the staff of Saugus High School Cheer or any licensed physician or athletic trainer to perform upon or authorize, without prior consent, any reasonable, necessary medical treatment to:

Name of Participant

Signature of Parent/Guardian: _____

Printed Name of Parent/Guardian: _____