

Participant Registration Form

Revised 2/16/2022



Family Contact Information:

Parent/Legal Guardian 1:		Relationship:	
Address:		Phone:	
		Email:	

Parent/Legal Guardian 2:		Relationship:	
Address:		Phone:	
		Email:	

Athlete #1:

Participant Name		DOB	/ /
Medical Concerns		Age:	
		Gender:	

Athlete #2:

Participant Name		DOB	/ /
Medical Concerns		Age:	
		Gender:	

Athlete #3:

Participant Name		DOB	/ /
Medical Concerns		Age:	
		Gender:	

Emergency Contact Information:

Additional Emergency Contact:		Relationship:	
Phone:			
Primary Care Physician:		Phone:	
Hospital of Choice			

Additional Information:

How did you hear about us?	
Any other names that may appear on your payments:	

In consideration of my membership in TNT Gymnastics Center, Inc./Fire Cheer All-Stars, and my participation in TNT Gymnastics Center, Inc./Fire Cheer All-Stars classes, events, and activities. I agree to be bound by each of the following:

1. Eligibility: I have read and agree to the rules and policies of TNT Gymnastics Center, Inc./Fire Cheer All-Stars
2. Readiness to Participate: I understand the nature of the Activity and I represent that the participant is qualified, in good health, and in proper physical condition to participate in the Activity. It is my responsibility to discontinue participation of the participant if any of the above become untrue or I believe any Activity becomes or is no longer safe for participant's participation.
3. Medical Agreement: I hereby give my consent to TNT Gymnastics Center, Inc./Fire Cheer All-Stars and/or the Host Organization to provide, through a medical staff of its choice, customary medical/athletic training attention, transportation, and emergency medical services as warranted in the course of my participation.
4. Waiver and release: I understand the nature of the Activity and that the athlete is qualified, in good health, and in proper physical condition to participate. It is my responsibility to discontinue participation of the athlete if any of the above become untrue or is no longer safe for the athlete to participate. I hereby understand while participating in any activity at TNT Gymnastics, Inc./ Fire Cheer All-Stars, that I do not hold any one persons or employee responsible for exposure to any illness, injury or bodily harm claims, including Flu or Coronavirus. I hereby give my consent to TNT Gymnastics Center, Inc./ Fire Cheer All-Stars, to provide, through staff of choice, customary medical/athletic training attention, transportation, and emergency medical services as needed. I am fully aware of and appreciate the risks, including the risk of catastrophic injury, paralysis, and even death, as well as other damages and losses associated with participation in gymnastics activities. I further agree that TNT Gymnastics Center, Inc./ Fie Cheer All-Stars and the sponsor of any TNT Gymnastics Center, Inc./Fire Cheer All-Stars event, along with employees, agents, officers, and directors of these organizations shall not be liable for any losses or damages occurring as a result of my participation in the event.
5. Publication Release: I hereby grant TNT Gymnastics Center, Inc./Fire Cheer All-Stars and those acting under its authority the permission to use my child's photograph, video image, voice, name, likeness, and awards received. I understand that publication includes but is not limited to newspaper, advertisements, websites, magazines, and promotional materials.

Photo/Publication Consent	
Yes, You may use my Participant	
No, you may not use my participant	

As Parent/Legal Guardian of this athlete I hereby verify by my signature below that I fully understand and accept each of the above conditions for permitting my child to participate in classes, events, competitions, and activities conducted by TNT Gymnastics Center, Inc./Fire Cheer All-Stars. I assume all financial responsibility related to my athletes participation. I have read, understand, and accept the policies as outlines in TNT Gymnastics/ Fire Cheer All-Stars rules and policies.

Parent/ Legal Guardian Signature:		Date:	/	/
Athlete Signature:		Date:	/	/