EXA Sports

Eau Claire: 800 Wisconsin St., Suite, 215, Building 4/6- Mailbox 53 T Eau Claire, WI 54703
Menomonie: 2920 59th St, Menomonie, WI 54751 Website: www.Exa-sports.com
Email: info@exceptionalcheer.com
RELEASE OF LIABILITY, WAIVER OF LIABILITY, ASSUMPTION OF FULL RESPONSIBILITY FOR ALL RISK OF BODILY INJURY, DEATH OR DAMAGES
As a parent/legal guardian of (child's name), I
hereby consent to his/her participation in any or all activities being held at the Exceptional Cheer, LLC (EXA-Sports) including
participation in tumbling, cheerleading, trampoline and use of any equipment. I understand these activities with EXA Sports
may result in injuries such as paralysis or even death from various causes, known and unknown, which include but are not
limited to, the heights from the equipment and the body during certain movements, rotation of the body and movement of the
body.
I am fully aware that these gym activities may be without instruction from EXA Sports coaches, instructors or employees and
my child is engaging in these activities under that understanding and at our own risk. I am fully aware of the inherent risk
involved in tumbling, cheerleading, trampoline and any and all other activities with EXA Sports, and the possibility of injury or death from participating in these activities.
acain it offi participating in these determines.
Acting on my behalf agree to waive any and all rights, claims, damages, actions, cause of action or suits of any kind or nature
whatsoever which I have or my child has against Exceptional Athletics or any agent, employee, representative or acting on
their behalf and to indemnify, defend and hold harmless Jenifer Wieland, Amy LaVelle, and any Exceptional Athletics agent,
employee, representative or other person acting on their behalf, from liability or ordinary negligent conduct which may occur. Should any part or parts of this agreement be null and void, the balance of the agreement shall remain valid and maintain its
full force and effect.
Signature of Parent/Guardian:datedate
Franciscope Phone #
Emergency Phone #
Emergency Contact Name: