

UPT CHEERLEADING

INFORMED CONSENT AND ACKNOWLEDGEMENT AGREEMENT

I, _____, being a student at the University of Pittsburgh at Titusville, wish to participate in cheerleading tryouts for the cheerleading team, and if accepted as a cheerleader, WILL participate in ALL cheerleading activities of the University of Pittsburgh at Titusville, during the current academic year.

I understand that I am required to be in good physical shape and condition and that the activities which I will be asked and expected to participate in are strenuous and require physical and athletic agility. It has been fully explained to me that these activities include, but are not necessarily limited to, a variety of gymnastic routines, include somersaults, back handsprings, aerials, and round-offs; that there will be a variety of mounts and stunts requiring coordination of more than one participant on the squad; that these activities will not be confined to any one site or venue, but rather a variety of sites and places throughout the school year.

It has also been explained to me that cheerleading is a sport in which the risk of injury is high; that any one of the routines involving my participation in cheerleading activities in general could lead to serious injury, including partial or total paralysis, or even death. Despite this understanding of the possibility of serious or catastrophic injury or death and the risks involved, I still wish to participate.

I have and will ***maintain*** health insurance during the traditional cheerleading season. I understand that the University of Pittsburgh will not be responsible for any medical bills and claims that my primary health insurance has rejected. I agree to allow the Athletic Department of the University of Pittsburgh at Titusville to keep a copy of my insurance and emergency contact information and release this information to the appropriate emergency medical personnel in case of sudden illness/injury.

I also understand that I may be required to travel to locations off-campus for the purpose of participation in various cheerleading activities. I consent to such travel.

I agree that I may be required to purchase uniform items including, but not limited to, proper socks, body briefs/sports bras, hair ties, etc. I also agree to participate in fundraisers, if necessary.

I represent to you that, to the best of my knowledge and belief, I have no physical, medical, or mental disability, or other limitation that would restrict my ability to fully participate in this activity as described and explained to me.

I agree to, and by the signing of this agreement, release the coaches, assistant coaches, advisors, volunteers, staff of the University of Pittsburgh at Titusville, from any claim of negligence by me, my heirs, executors, and assigns, from any liability arising from claims for damages for injury to me and any claims for loss or damage to my property which may arise out of my participation in the University of Pittsburgh at Titusville, cheerleading program for the current school year.

In witness whereof, I have affixed my signature to this agreement this ____ day of _____,
at the University of Pittsburgh at Titusville, Titusville, Pennsylvania.

Participant Signature

Date

Parent or Guardian Signature for Participants under 18 years of age