



REGISTRATION FORM

The Mission of Build it Athletix is to provide a Competitive outlet for local athletes in the sport of cheerleading and dance. To teach athletes the value of team work, sportsmanship, dedication, and developing skills while building confidence in a fun and safe environment.

Date: _____

How Did you Hear about Build It Athletix?

- Newspaper
 Friend (list name) _____
 Radio
 Gym

	Cheerleader/ Dancer's Name	Birthday MM/DD/YY	Age as of 8/31/10	Cheerleader's E-mail	School/Grade
1 st					
2 nd					
3 rd					

Athlete's Address: _____ City/State/Zip: _____

Athlete's Phone Number: _____

Previous Cheer, Dance or Tumbling Experience: _____

Sizes (circle correct size) These sizes will be used to order practice uniforms.

Tshirt/Tank: YS YM YL AS AM AL

Shorts: YS YM YL AS AM AL

	Parent's/Guardian's Name	E-mail Address	Home Phone	Work Phone	Cell Phone
Mother					
Father					
Other					

Parent/Guardian's Address: _____ City/State/Zip: _____

*only complete if different from athlete

How do you prefer to be contacted? _____

Emergency Contact person (Other than Parent/Guardian): _____

Relationship to athlete: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____

For Office Use Only!!	Cash	Check # _____	Clinic Paid _____	Registration Paid _____	File By

BUILD IT ATHLETIX LLC

1511 N. Thierman Rd., Spokane Valley WA 99212

(509) 389-4028

BuildItAthletix.com

INSURANCE INFORMATION & MEDICAL RELEASE

I am the parent or legal guardians of the child identified below and voluntarily authorize my child to participate in Build It Athletix. I understand that there are inherent dangers associated with gymnastics, cheerleading and dance and recognize that any physical activity involves risks of serious injury or death, including but not limited to temporary or permanent muscular and skeletal injury and paralysis.

I assume all risks, whether foreseen or unforeseen, in connection with my child participation in this activity.

I AGREE TO DEFEND, INDEMNIFY, HOLD HARMLESS, WAIVE, AND RELEASE BUILD IT ATHLETIX LLC, TOGETHER WITH ITS OFFICERS, TRUSTEES, EMPLOYEES, AGENTS AND MEMBERS, AGAINST ANY AND ALL LIABILITY, CLAIMS AND CAUSES OF ACTION ARISING OUT OF, OR IN ANY WAY CONNECTED WITH MY CHILD'S PARTICIPATION IN THIS ACTIVITY.

Parent's Name: _____ Parent's Signature: _____

Athlete's Doctor: _____ Phone Number: _____

Insurance Company: _____ Policy Number: _____

Medication Currently Taking: _____

Allergies to medications: _____

Further medical information, special needs and disabilities: _____

Appearance Clause

I understand that from time to time Build It Athletix LLC produces promotional material about its programs. I understand that as a participant I may be included in videotape or photographs taken during observation, instruction, classes, practices, performances and/or competitions. I hereby grant Build It Athletix LLC, its successors, assignees, licensees, sponsors, any television networks, and all other commercial exhibitors, the exclusive right to photograph and/or videotape the participant and further utilize participants face, likeness, voice and/or appearance as part of the program in advertising, marketing and promoting the program without reserve or limitation. In granting this license, I undersign that Build It Athletix LLC is under no obligation to exercise any of its rights, licenses and privileges herein granted by the participant.

Please initial blanks:

_____ I understand that any formal or informal team photo may be placed on the website for informational/promotional purposes anytime during the year.

_____ I understand that any/all photos taken of me/ my son/daughter as a member of Build It Athletix and/or its affiliated gyms may be used for publication and team promotion.

_____ I understand that casual action photographs may be taken during observation, instruction, classes, practices, performances and/or competitions.

.....
I do not want any individual photographs of my son/daughter _____ placed on Build It Athletix website.

Parent Signature

Date

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