

NCA & NDA CHAMPIONSHIP RELEASE AND WAIVER – ADULT

Every Advisor/Coach/Chaperone must turn in this completed and signed form at the designated check-in/registration area. ALL areas must be completed. *Please photocopy and distribute to each adult attending the event. Coach must retain a photocopy of each completed form for his/her records.*

_____ Name	_____ School/Gym Name	_____ Name of Event
_____ Address	_____ School/Gym Address	_____ City, State of Event
_____ City, State & Zip (_____)	_____ School/Gym City, State, & Zip (_____)	_____ Event Dates
_____ Cell Phone Number	_____ School/Gym Phone Number	<input type="checkbox"/> Check here if you are the Advisor/Coach
_____ Email Address	Squad Type: <input type="checkbox"/> CHEER <input type="checkbox"/> DANCE	<input type="checkbox"/> Check here if you are a Chaperone
<input type="checkbox"/> Yes, you have my permission to send me updates/newsletters from Varsity!		<input type="checkbox"/> Check here if you are 21 or older
		<input type="checkbox"/> Check here if you are employed by the school or school district.

Liability Release. For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, I agree to participate in the above ("Event") to be conducted by Varsity Spirit LLC ("Varsity Spirit") d/b/a National Cheerleaders Association (NCA) and/or d/b/a National Dance Alliance (NDA.) I further agree to release and to hold harmless Varsity Spirit, Varsity Spirit's corporate sponsors (hereinafter "Sponsors"), the hosting Site, (university, hotel, convention center, high school) on whose premises the Event will occur (hereinafter the "Location") the affiliates of Varsity Spirit, and the respective directors, officers, representatives, members, agents and employees of US All Star Federation, Inc., a non for profit corporation ("USASF"), American Association of Cheerleading Coaches and Administrators, Inc., a not for profit corporation ("AACCA") (hereinafter collectively "Releasees") from any and all liability, whether caused by the negligence of the Releasees or otherwise for any claim, judgment, loss, liability, cost and expenses (including, without limitations, attorney's fees and costs) arising out of or connected with the Event, including any claim arising out of or connected with any illness or injury (minimal, serious, catastrophic and/or death) that I may incur or sustain during the Event, all activities associated with the Event and while traveling to and from the site for the Event whether or not the Event actually occurs. I further expressly agree to indemnify and hold harmless Releasees and Releasees' heirs, successors, assigns, executors and administrators against loss from any further claims, demands or actions that may subsequently be brought by me or by any other persons on the account of damages of any character resulting to me in any way from the foregoing activities. I further agree to reimburse and to make good to Releasees any loss, or costs Releasees may have to pay as a result of any such action, claim, or demand.

I hereby warrant that I have read this Liability Release in its entirety and fully understand its contents. I am aware that this Liability Release releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I further acknowledge that nothing in this Liability Release constitutes a guarantee that the Event will occur. I have signed this document voluntarily and of my own free will.

Signature of Adult: _____ Date: _____

Medical Release. I acknowledge and agree that such participation subjects me to possibility of physical illness or injury (minimal, serious, catastrophic and/or death) and that I acknowledge that I am assuming the risk of such illness or injury by participating in the event. In the event of such illness or injury, I authorize Varsity Spirit to obtain necessary medical treatment for me and hereby release and hold harmless Releasees in the exercises of this authority. I further acknowledge and understand that I will be responsible for any and all medical and related bills that may be incurred by me for any illness or injury that I may sustain during the Event and while traveling to and from the site for the Event whether or not the Event actually occurs.

Appearance Agreement. I understand that as a participant and/or a spectator at the Event, I may be included in videotapes, photographs, DVDs, podcasts, and videocasts taken during the Event. Therefore, without reservation or limitations, I hereby assign, transfer and grant to Varsity Spirit, its successors, assignees, licensees, sponsors, any television networks, and all other commercial exhibitors the exclusive right to photograph and/or videotape me and to utilize such videotapes and photographs and my name, face, likeness, voice and appearance as a part of the Event, in advertising and promoting the Event or in advertising and promoting similar future events or in advertising and promotions related to Varsity Spirit, and for any other use or purpose whatsoever, without reservations and limitations. I further understand that neither Varsity Spirit nor any third party is under any obligation to exercise any of the foregoing rights, licenses and privileges. I waive any right to inspect or approve any materials related thereto.

Third Party Agreement. I understand that Varsity Spirit d/b/a NCA and/or NDA from time to time disclose participants/coach information to third parties who agree to the confidential nature of the information.

Supervision. A Chaperone/Adult (age 21 or older) is required to attend with participants. This Chaperone will be responsible for the participants at all times including but not limited to swimming, beach activity, cheer/dance practice outside of Event, free time at Event site or hotel. **The Releasees are not responsible for participants' supervision.**

Event Rules. I further acknowledge and understand that Varsity Spirit has established rules and regulations pertaining to conduct, behavior and activities of all Event participants by which I agree to abide during the Event (copy of which is listed on the back of this form), and that I will be responsible for my failure to abide by those rules and regulations. I have received, read and understand the Event rules. I understand that violation of the rules can result in dismissal from Event with no refund. I understand that Sponsors may distribute samples of their products at Event.

Insurance Information. The following is REQUIRED for participation.

Insurance Company: _____

Insurance Company Address: _____

Medical Insurance Policy/Group Number - REQUIRED: _____ Insurance Company Phone # : _____ - _____ - _____

Emergency Information:

Name to contact: _____ Emergency Contact Address: _____

City, State, Zip: _____ Cell Phone Number: (_____) _____

Daytime Telephone: (_____) _____ Evening Telephone: (_____) _____

I represent that any medication to which I am allergic or medications that I am currently taking are listed below. I agree that I shall bring medications which I am currently taking with me to the Event and that I shall consume the prescribed dosage for such medications. **Varsity Spirit will not administer or supply any type of medication at Event.**

Medications (if any): _____

Allergic to (if any): _____

I acknowledge that I suffer from the following conditions: _____

Family Doctor: _____ Phone Number: (_____) _____ Your Birthdate: ____/____/____

I hereby warrant that I have read this Adult Release and Waiver Form in its entirety and fully understand its contents. I am aware that this Adult Release and Waiver Form releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I further acknowledge that nothing in this Adult Release and Waiver Form constitutes a guarantee that the Event will occur. I have signed this document voluntarily and of my own free will.

Signature of Adult: _____

Date: _____

Witness Signature: _____ Address _____ Date: _____

SAFETY, COMPLIANCE, AND SPORTSMANSHIP.

1. I understand that cheerleading/dance is an athletic activity, which requires proper training and supervision.
2. I understand it is my ethical duty to put the interest and safety of my athletes first, and not to put cheerleaders/dancers at unnecessary risk.
3. I agree to follow all safety and performance guidelines both by the letter and spirit of the rule.
4. I agree to abide by the eligibility stipulations for divisions as determined by NCA & NDA. I understand that if a violation is reported, I may be required to supply eligibility verification to event officials.
5. I will accept all judges' rulings as final.
6. I will support the Championship outcome and represent my program with integrity.
7. I understand my position as a role model for my team and will conduct myself in a professional manner.
8. I will display good sportsmanship and require the same of my cheerleaders/dancers.

NO TELEPHOTO LENSES

1. Because we take the safety and security of our participants seriously, our policy is to protect your privacy and that of all participants.
2. Audience use of telephoto lenses will not be allowed.
3. Unauthorized users of such equipment will be escorted from our events.
4. I acknowledge that I will communicate this information to all parents and supporters of participants from the school/gym I represent at this event.

Signature of Adult: _____

Date: _____



NCA & NDA CHAMPIONSHIP RELEASE AND WAIVER – PARTICIPANT

Every Participant must have a completed and signed release form to turn in at registration in order to participate. ALL areas must be completed.

Please photocopy and distribute to each participant attending the event.

Coach must retain a photocopy of each completed form for his/her records and keep them with the team throughout the event..

_____ Minor's Name	_____ Name of Parent / Legal Guardian	_____ Name of Event
_____ Address	_____ Parent / Legal Guardian Email Address	_____ City, State of Event
_____ City, State & Zip (_____)	_____ School/Gym Name	_____ Event Dates (_____)
_____ Cell Phone Number	_____ School/Gym Address	_____ School/Gym Phone Number
_____ Participant Email Address <input type="checkbox"/> <i>Yes, you have my permission to send me updates/newsletters from Varsity!</i>	_____ School/Gym City, State, & Zip	Squad Type: <input type="checkbox"/> CHEER <input type="checkbox"/> DANCE

Liability Release. For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, I _____, as parent or legal guardian of _____, a minor (hereinafter "Minor"), hereby grant the permission necessary to allow Minor to participate in the above ("Event") to be conducted by Varsity Spirit LLC ("Varsity Spirit") d/b/a National Cheerleaders Association (NCA) and/or d/b/a National Dance Alliance (NDA.) I, in my own behalf and on behalf of the Minor, further agree to release and to hold harmless Varsity Spirit, Varsity Spirit's corporate sponsors (hereinafter "Sponsors"), the hosting Site, (university, hotel, convention center, high school) on whose premises the Event will occur (hereinafter the "Location") the affiliates of Varsity Spirit, and the respective directors, officers, representatives, members, agents and employees of US All Star Federation, Inc., a non for profit corporation ("USASF"), American Association of Cheerleading Coaches and Administrators, Inc., a not for profit corporation ("AACCA") (hereinafter collectively "Releasees") from any and all liability, whether caused by the negligence of the Releasees or otherwise for any claim, judgment, loss, liability, cost and expenses (including, without limitations, attorney's fees and costs) arising out of or connected with the Event, including any claim arising out of or connected with any illness or injury (minimal, serious, catastrophic and/or death) that minor may incur or sustain during the Event, all activities associated with the Event and while traveling to and from the site for the Event whether or not the Event actually occurs. I further expressly agree to indemnify and hold harmless Releasees and Releasees' heirs, successors, assigns, executors and administrators against loss from any further claims, demands or actions that may subsequently be brought by Minor or by any other persons on the account of damages of any character resulting to Minor in any way from the foregoing activities. I further agree to reimburse and to make good to Releasees any loss, or costs Releasees may have to pay as a result of any such action, claim, or demand.

I, in my own behalf and on behalf of the Minor, hereby warrant that I have read this Liability Release in its entirety and fully understand its contents. I, in my own behalf and on behalf of the Minor, am aware that this Liability Release releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I, in my own behalf and on behalf of the Minor, further acknowledge that nothing in this Liability Release constitutes a guarantee that the Event will occur. I, in my own behalf and on behalf of the Minor, have signed this document voluntarily and of my own free will.

Signature of Parent or Legal Guardian: _____ **Date:** _____

Medical Release. I, in my own behalf and on behalf of the Minor, acknowledge and agree that such participation subjects Minor to possibility of physical illness or injury (minimal, serious, catastrophic and/or death) and that I, in my own behalf and on behalf of the Minor, acknowledge that the Minor is assuming the risk of such illness or injury by participating in the event. In the event of such illness or injury, I authorize Varsity Spirit to obtain necessary medical treatment for the Minor and hereby, in my own behalf and on behalf of the Minor, release and hold harmless Releasees in the exercises of this authority. I further acknowledge and understand that I will be responsible for any and all medical and related bills that may be incurred on behalf of the Minor for any illness or injury that the Minor may sustain during the Event and while traveling to and from the site for the Event whether or not the Event actually occurs.

Appearance Agreement. I understand that as a participant and/or a spectator at the Event, the Minor may be included in videotapes, photographs, DVDs, podcasts, and videocasts taken during the Event. Therefore, without reservation or limitations, I, in my own behalf and on behalf of the Minor, hereby assign, transfer and grant to Varsity Spirit, its successors, assignees, licensees, sponsors, any television networks, and all other commercial exhibitors the exclusive right to photograph and/or videotape the Minor and to utilize such videotapes and photographs and Minor's name, face, likeness, voice and appearance as a part of the Event, in advertising and promoting the Event or in advertising and promoting similar future events or in advertising and promotions related to Varsity Spirit, and for any other use or purpose whatsoever, without reservations and limitations. I further understand that neither Varsity Spirit nor any third party is under any obligation to exercise any of the foregoing rights, licenses and privileges. I, in my own behalf and on behalf of the Minor, waive any right to inspect or approve materials related thereto.

Third Party Agreement. I understand that Varsity Spirit d/b/a NCA and/or NDA from time to time disclose participants/coach information to third parties who agree to the confidential nature of the information.

Supervision. A Chaperone/Adult (age 21 or older) is required to attend with participants. This Chaperone will be responsible for the participants at all times (including but not limited to swimming, beach activity, cheer/dance practice outside of Event, free time at Event site or hotel). **The Releasees are not responsible for participants' supervision.**

Event Rules. I further acknowledge and understand that Varsity Spirit has established rules and regulations pertaining to conduct, behavior and activities of all Event participants by which Minor and I agree to abide during the Event (copy of which is listed on the back of this form), and that Minor and I will be responsible for his/her/my failure to abide by those rules and regulations. Minor and I have received, read and understand the Event rules. Minor and I understand that violation of the rules can result in dismissal from Event with no refund.

Insurance Information. The following is REQUIRED for participation.

Parent's Name: _____

Insurance Company: _____

Insurance Company Address: _____

Medical Insurance Policy/Group Number - REQUIRED: _____ Insurance Company Phone # : _____ - _____ - _____

Emergency Information:

Name to contact: _____ Emergency Contact Address: _____

City, State, Zip: _____ Cell Phone Number: (_____) _____

Daytime Telephone: (_____) _____ Evening Telephone: (_____) _____

I represent that any medication to which Minor is allergic or medications that Minor is currently taking are listed below. I agree that Minor shall bring medications which Minor is currently taking with him/her to the Event and that he/she shall consume the prescribed dosage for such medications. **Varsity Spirit will not administer or supply any type of medication at Event.**

Medications (if any): _____

Allergic to (if any): _____

I acknowledge that the Minor suffers from the following conditions: _____

Family Doctor: _____ Phone Number: (_____) _____ Minor's Birthdate: ____/____/____

I, in my own behalf and on behalf of the Minor, hereby warrant that I have read this Participant Release and Waiver Form in its entirety and fully understand its contents. I, in my own behalf and on behalf of the Minor, am aware that this Participant Release and Waiver Form releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I, in my own behalf and on behalf of the Minor, further acknowledge that nothing in this Participant Release and Waiver Form constitutes a guarantee that the Event will occur. I, in my own behalf and on behalf of the Minor, have signed this document voluntarily and of my own free will. Minor and I understand that Sponsors may distribute samples of their products at event.

Signature of Parent or Legal Guardian: _____

Date: _____

Relationship to Minor: _____

I, identified above as Minor, acknowledge that I have read this Release and Waiver form.

Signature of Minor: _____

Date: _____

Witness Signature: _____ Address _____

Date: _____

EVENT RULES

General Championship Rules

1. Cheering, chanting and dancing will be practiced in designated areas ONLY.
2. Squads / teams must be on time to all scheduled practices and performances.
3. Please leave valuables at home (rings, jewelry, etc.). NCA & NDA will not be responsible for lost or stolen items.
4. Participants may not wear unapproved jewelry of ANY kind at any time during practice or performances. Teams with participants that do not comply will be assessed a legality point deduction.
5. Should an injury occur during your assigned practice or performance times, please contact an NCA & NDA trainer or member of the NCA & NDA corporate staff.
6. Smoking at championships & events is prohibited, and the use or possession of alcohol or other illegal substances is prohibited.
7. Hazing or initiations of any type is prohibited.
8. If attending an event as a resident, all participants must follow these basic rules: A) No running or unnecessary noise in the halls. B) Always lock your door when you leave the room and when you are in your room. Do not prop doors open. C) There will be no tumbling, horseplay, partner stunts or practicing in the hotel / resort except in designated practice areas. D) Any damage to the room will be charged to your group. Be sure to leave your room as clean as you found it.
9. NCA & NDA fervently encourage and support sportsmanship, integrity and fairness among all participants and coaches/advisors/directors in all facets of cheerleading and dance, including but not limited to team practice and performance. NCA & NDA maintain and enforce a zero tolerance policy for unsportsmanlike conduct by any and all its championship patrons. NCA & NDA reserve the right to remove participants, coaches/directors/advisors, or spectators from the performance venue and/or hotel should offensive or inappropriate behavior toward other participants, coaches/directors/advisors, officials or spectators occur.

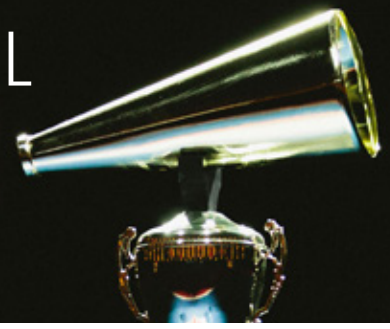


In addition to the general rules above, the following rules apply to all Championships:

1. NCA & NDA is not responsible for participants' supervision.
2. Participants must have an adult chaperone/coach/director, for participants' supervision, in attendance at all times during the championship.
3. Only coaches / directors should approach the NCA & NDA Event Information Table to resolve disputes. Spectators or participants will NOT be allowed to pursue disputes.

NCA SENIOR & JUNIOR HIGH SCHOOL NATIONAL CHAMPIONSHIP

Kay Bailey Hutchison Convention Center
Dallas, TX | January 27 - 28, 2018



SCHOOL CHEER ELIGIBILITY ROSTER

Please list EACH participant competing with your organization, as well as their respective performance categories. This information must be completed and submitted to NCA at the time of registration. This information must be confirmed, authorized, and approved by your institution's Principal or School District in order for your team to compete. (Please PRINT or TYPE - make additional copies as needed.)

TEAM NAME _____

ATHLETE IS COMPETING IN THE FOLLOWING CATEGORIES:

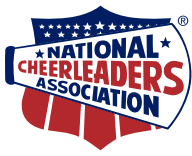
	PARTICIPANT NAME	AGE	GRADE	PERFORMANCE DIVISION	TIME OUT CHEER	TIME OUT DANCE	FIGHT SONG	TOTAL ROUTINES PER PARTICIPANT
EX.	SUSIE HERKIMER	16	10	X	X			2
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
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15.								
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21.								
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23.								
24.								
25.								

I certify that all the above listed participants meet the eligibility requirements of (school) _____ to be a member of the team participating. MUST BE SIGNED AND NOTARIZED BY PRINCIPAL OR SCHOOL DISTRICT'S OFFICE.

Signature _____ Date _____

Print Name _____ Daytime Phone _____

Title _____ Email _____



2017-2018 COMPETITION POLICIES & PROCEDURES



Varsity Spirit has implemented a policies and procedures for all events. In order to provide a positive, fair and professional competition environment the coach of each team is required to sign this form, but before signing, please read and review the following:

I have read and understand the NCA Rule Book (NCA.varsity.com) or NDA Rule Book (NDA.varsity.com) pertaining to the registration and competition guidelines for the event which I am attending.

MUSIC GUIDELINES

- I have read and understand the USA Cheer Music Copyrights Educational Initiative and all sound recordings used in our team’s music shall only be used with written license from the owners(s) of the sound recordings.
- For the most up to date music information, visit <http://varsity.com/music>. If you have any questions, cheer teams should email info@usacheer.net and dance teams should email dancemusic@varsity.com. Please check Preferred Provider list for updates and changes periodically.
- Teams must be able to provide proof of licensing, in the form of a printed copy, during registration at the event they are attending.
- If a team does not have the required paperwork, they will be given the option to perform to an approved track of music or a track with counts (provided by Varsity Spirit).
- If a team does not have the required paperwork, and chooses not to perform to the approved track of music or a track with counts, the team will be disqualified from the competition and not be allowed to perform.
- If there are concerns regarding a team’s use of music, a Challenge Form must be completed immediately following the team’s performance.
- A challenge can only be made by the official coach, advisor, director or gym owner of a team competing at the event at which the challenge is being made.
- Challenge Process
 - All music challenges must be submitted in writing to the event director.
 - There will be a \$100 fee to request a music challenge, which must be in the form of a check made payable to St Jude Children’s Research Hospital.
 - Challenges will be reviewed and finalized within 48 hours of the event.
 - If the challenge is correct, fees collected will be voided. If the challenge is incorrect, fees will be donated to St. Jude.
- Each team is required to have a representative remain at the music station that knows the routine and music. This representative is responsible for starting the music and stopping the music in case of technical malfunction or injury. Please make sure that all devices have a head phone jack to connect to sound system and are fully charged, volume turned up and placed in airplane mode. If using a CD make sure it’s unscratched so it doesn’t skip.

VIDEO MEDIA POLICY

No commercial recording (audio or visual) or commercial live streaming is allowed in the event venue or other event-related venues (including, but not limited to, hotels and restaurants) or on the grounds of any such venues (collectively, “Event Locations”). In the event a team authorizes the commercial recording or streaming in any Event Location, the team will be automatically disqualified. In addition, the personal, non-commercial use of live streaming apps (such as Periscope, Facebook Live, etc.) to capture all or any part of a performance during the event is not permitted. By attending/purchasing admission to the event, each attendee grants permission to Varsity Spirit, LLC and its affiliates, designees, agents, licensees, and invitees to use the image, likeness, actions and statements of the attendee in any live or recorded audio, video, film, or photographic display or other transmission, exhibition, publication, or reproduction made of, or at, the event in any medium, whether now known or hereafter created, or context for any purpose, including commercial or promotional purposes, without further authorization or compensation.

I have read, understand and will abide by all Varsity, NCA, and NDA rules and regulations and at all times I will support the results of the competition, as I am a role model for my program.

Program Name _____

Team Name _____

Event Name _____

Coach/Director’s Name _____

Coach/Director’s Signature _____

Date _____

NCA SENIOR & JUNIOR HIGH SCHOOL NATIONAL CHAMPIONSHIP

Kay Bailey Hutchison Convention Center
Dallas, TX | January 27 - 28, 2018



TEAM BIO FORM

Please take the time to completely fill out this form - a separate one for each team in the competition. The information you share will be used to produce Championship related content for varsity.com, and Varsity TV. Make sure your team gets the recognition they deserve! Turn in completed form during event registration or email at least 1 week prior to Jenni Parrish at jparrish@varsity.com.

School Name _____ City & State _____

Team Name _____ Team Nickname (if any) _____

Division _____ Team Colors _____

Number of athletes competing on floor _____ Mascot _____

Breakdown of athletes by grade _____

Captain's Name(s) _____

Head Coach's Name _____

Additional Coaches' Name(s) _____

Team Traditions _____

Team Goals _____

How many years have you attended NCA Nationals? _____

Last year's placement _____

List all NCA titles won _____

Strongest part of your routine _____

What part of your routine should we be sure and not miss? _____

Coach's contact number at event _____ Coach's Email _____

Any additional information you'd like to share about your team _____

Team Twitter Handle _____ Official Team Hashtag _____

Team Facebook Page _____ Team Instagram _____

THE WORK IS WORTH IT.®