



You're Invited to a Cheersport Sharks Birthday

Join us if you dare for a
Shark Attack day of
Chompdown fun

Party For: _____

Date: _____

Location: 119 Iber Rd. Unit #1&2 Stittsville
RSVP PLEASE :)



Authorization, Release, and Waiver

Childs Name: _____ Parents Name: _____
Phone Number: _____

I authorize CHEER SPORT SHARKS LIMITED and its representatives to consent to immediate injury treatment for my child when I cannot be reached to so consent. I also give CHEER SPORT SHARKS LIMITED and its representatives consent to administer the necessary emergency care to my child to stabilize and/or improve the current injury or condition that my child may have sustained during activities related to Cheer Sports instruction, practices, or performances. No prior determination of life threatening emergency or danger of serious permanent injury resulting from treatment need be made under this authorization. Exceptions to this authorization are as follows:

I am fully aware that any activity involving motion, height, or athletic activities creates the possibility of serious injury, and I further agree to hold Cheer Sport Sharks Limited, and its staff, officers, or representatives harmless for any injury or resulting expense(s). I release and discharge all rights and claims against Cheer Sport Sharks Limited, and its parties. Cheer Sport strives to provide a maximum in safety procedures and guidelines, and cannot assume responsibility for any accidents, injury, or illness that may occur.

Parent/Guardian Signature: _____
Date: _____