

Please bring this form with you to tryouts. A parent must sign this release for you to participate. Thank you!

TRYOUT WAIVER FORM - PLEASE PRINT

Student's Name _____

Address _____ Home # _____
Cell # _____

I, _____ give permission for my child to participate in the 2008 cheerleading tryouts. I understand that neither the cheerleaders, coach nor Wartburg College is responsible for accidents and/or injury to the participants.

In case of emergency, please contact (Name) _____ at # _____.

SIGNATURE: _____ DATE: _____

Please list any medical condition that we should be aware of: _____
