

Wisconsin Association of Cheer/Pom Coaches, Inc.
ORGANIZATION LIABILITY AUTHORIZATION FORM
 ONE FORM PER TEAM NEEDED TO BE FILLED OUT BY **COACH**
 (Signatures by Administration, Gym Director and Coach are required)

COMPLETE ORGANIZATION NAME _____

During the athletes stay at the event site, all athletes will be closely supervised in every activity. It is to be understood that the Wisconsin Association of Cheer and Pom Coaches, Inc. (WACPC) and the event host cannot be held responsible for any "Act of God" or unforeseen incident that might occur on the way to and from the event. WACPC and event host will not be liable or responsible for any injury, loss, damage, or delay resulting from any act or neglect of any person or company whose services are retained by WACPC for the benefit of program participants. Furthermore, WACPC and event host cannot be held responsible for any act, error, or omission on the part of any program participant or participants. Additional expenses if incurred under any of these circumstances must be borne by the program participants. It is understood that WACPC has a **NO REFUND** policy.

It is understood that WACPC and the event host cannot be held responsible for any discipline problem encountered with an athlete. Any athlete possessing or using drugs or alcohol or behaving in any manner inconsistent with WACPC standards or local, state, or federal statutes will be immediately dismissed from the program. The parents/guardians and organization will be notified.

WACPC and the event host will not be held responsible for loss or damage to an athlete's personal belongings.

Each of the undersigned has carefully read all the above statements, and with full understanding of the terms, consents to participation in the WACPC Coaches and Captains Conference, WACPC Regional High School Cheer and Dance Championships, WACPC State High School Cheer and Dance Championships (including All-State), WACPC State Junior and Middle School Cheer and Dance Championships and the WACPC State All Star Cheer and Dance Championships.

ORGANIZATION _____ CITY _____

PRINCIPAL, GYM DIRECTOR or ATHLETIC DIRECTOR and COACH

_____	_____
(Print)	(Print)
_____	_____
(Signature Required)	(Signature Required)

- COACH; PLEASE PRINT ATHLETE'S NAMES (Signify Any or ALL Alternates with an "A")**
- | | |
|-----------|-----------|
| 1) _____ | 13) _____ |
| 2) _____ | 14) _____ |
| 3) _____ | 15) _____ |
| 4) _____ | 16) _____ |
| 5) _____ | 17) _____ |
| 6) _____ | 18) _____ |
| 7) _____ | 19) _____ |
| 8) _____ | 20) _____ |
| 9) _____ | 21) _____ |
| 10) _____ | 22) _____ |
| 11) _____ | 23) _____ |
| 12) _____ | 24) _____ |