

MINOR RELEASE / WAIVER FORM

**2026 ICU PAN-AMERICAN
CHEERLEADING CHAMPIONSHIPS &
ICU COPA AMERICA CHEERLEADING CHAMPIONSHIPS**

Organization / Team Name _____

Minor Release / Waiver Form

Do Not Staple

Full First/Given Name(s) of Minor _____
(Please Print)

Full Last/Family Name(s) of Minor _____

Street Address _____ City _____ State / Province _____

Postal Code _____ Country _____

Phone Number _____ Email _____

As used herein, "ICU" shall mean "International Cheer Union" and their respective parent, subsidiary and other affiliated organizations and companies, and the officers, directors, employees, agents, successors and assigns of each of the foregoing; and "FMPGA" shall mean "FEDERACIÓN MEXICANA DE PORRISTAS Y GRUPOS DE ANIMACIÓN (FMPGA)" and their respective parent, subsidiary and other affiliated organizations and companies, and the officers, directors, employees, agents, successors and assigns of each of the foregoing.

TERMS AND CONDITIONS OF PARTICIPATION – READ CAREFULLY BEFORE SIGNING

In consideration of my minor child's participation in the Sport of Cheer (Cheerleading & Performance Cheer) or other activities conducted by the **2026 ICU Pan-American Cheerleading Championship & 2026 ICU Copa Americana Cheerleading Championships** in Mexico City, Mexico on or about **25, 26 and 27 September 2026** pursuant to the 2026 ICU Pan-American Cheerleading Championship & 2026 ICU Copa Americana Cheerleading Championships in Mexico City, Mexico (the "Event"), wherever the Event and/or activities may occur, you hereby attest after reading this Form completely and carefully, including the notice above your signature, you acknowledge that participation in the Event by your minor child or ward is entirely voluntary, and that you understand and agree as follows:

- 1. RELEASE OF LIABILITY:** I agree, on behalf of my child or ward, to waive and release all liabilities, claims, actions, damages, costs or expenses of any nature ("Claims") associated with all the risks inherent in my minor child's or ward's participation in the Event or other activities conducted in conjunction with (whose risks may include, but are not limited to, exposure to Naegleria bacteria Fowlerii and coliform bacteria, muscle injuries, heat and stress-related issues, cuts, lacerations, and broken bones), whether or not such risks are overt and obvious. Further, on behalf of myself and my minor child or ward, I hereby release, covenant not to sue, and forever discharge the Released Parties (as defined under "INDEMNIFICATION/INSURANCE" below) from and to all Claims arising in any manner or in any way connected with my child's or ward's participation in the Event.
- 2. INDEMNIFICATION/INSURANCE:** I agree to indemnify and hold each International Cheer Union, all Event sponsors and charities having a presence at the Event and their respective parent, subsidiary and other affiliated or related organizations and companies; FEDERACIÓN MEXICANA DE PORRISTAS Y GRUPOS DE ANIMACIÓN (FMPGA) all Event sponsors and charities having a presence at the Event and their respective parent, subsidiary and other affiliated or related organizations and companies, and volunteers of each of the foregoing entities (collectively, the "Released Parties") harmless from and against any and all Claims arising out of or in any way connected with my child's or ward's participation in the Event, wherever the Event may occur, including, but not limited to, all attorneys' fees and disbursements through and including any appeal. I understand and agree that this indemnity includes any Claims based on the negligence, action or inaction of any of the Released Parties and covers bodily injury (including death), property damage, and loss by theft or otherwise, whether suffered by me or my child or ward either before, during or after participation in the Event. I agree that I am not relying on the Released Parties to have arranged for, or carry, any insurance of any kind for my benefit or that of my child or ward relative to my child's or ward's participation in the activities and the Event, and that I am solely responsible for obtaining any mandatory or desired life, travel, accident, property, or other insurance related to my child's or ward's participation in the Event, at my own expense.

3. **PHYSICAL CONDITION/MEDICAL AUTHORIZATION:** I hereby certify that my child or ward is physically fit to participate in the Event and has the skill level required in connection with the Event, and I have not been advised to the contrary. I agree that before my child or ward participates in any activities conducted in conjunction with the Event, I or my child or ward will inspect the related facilities and equipment. In connection with any injury sustained or illness or medical conditions experienced during my child's or ward's attendance in connection with the Event, I authorize any emergency first aid, medication, medical treatment or surgery deemed necessary by medical personnel if I am unable to act on behalf of my child or ward. I further authorize medical treatment for my child or ward, at my expense, should the need arise; however, I acknowledge that the Released Parties shall have no duty, obligation or liability arising out of the provision of, or failure to provide, medical treatment.
4. **INSPECTION OF EQUIPMENT AND FACILITIES:** I, or my child or ward if I am not present at the Event, will immediately report to the Event manager any unsafe condition that I, or my child or ward if I am not present at the Event, observe. My child or ward will refuse to participate, and I will refuse to allow my child or ward to participate, in the Event until all unsafe conditions observed by me or my child or ward have been remedied.
5. **PUBLICITY RIGHTS:** I also grant the Released Parties the right to photograph and/or record me and my child or ward and further to display, edit, use, and/or otherwise exploit my or my child's or ward's face, likeness, voice and appearance in all media, whether now known or here after devised (including, but not limited to, computer applications or other devices, online webcasts, and television programming (including broadcasts, movies, newspapers, and magazines) and in all forms, including, without limitation, digitized images or videos, throughout the universe in perpetuity, whether for advertising, publicity or promotional purposes, including, without limitation, publication and use of Event results and standings, without compensation, residual obligations, reservation or limitation, or further approval, and I agree to indemnify and hold the Released Parties harmless from any and all claims associated with such grant and right of use. The Released Parties are, however, under no obligation to exercise any rights granted to them.
6. **APPLICABLE LAW:** This Form will be governed by the laws of the Organizing Country, and any legal action related to or derived from this Form will be initiated exclusively in the organizer's country **AND I SPECIFICALLY WAIVE THE RIGHT TO TRIAL BY JURY.**

NOTICE TO THE NATURAL GUARDIAN(S) OF THE MINOR

PLEASE READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO ALLOW YOUR MINOR CHILD TO PARTICIPATE IN A POTENTIALLY HAZARDOUS ACTIVITY. YOU AGREE TO THAT, EVEN IF EACH OF THE RELEASED PARTIES (THAT IS INTERNATIONAL CHEER UNION AND THEIR RESPECTIVE PARENT, SUBSIDIARY AND OTHER AFFILIATED OR RELATED ORGANIZATIONS OR COMPANIES; **FEDERACIÓN MEXICANA DE PORRISTAS Y GRUPOS DE ANIMACIÓN (FMPGA)** AND THEIR RESPECTIVE PARENT, SUBSIDIARY AND OTHER AFFILIATED OR RELATED ORGANIZATIONS OR COMPANIES (COLLECTIVELY, THE "EVENT HOST/SPONSORS/CHARITIES")) AND THE OFFICERS, DIRECTORS, EMPLOYEES, AGENTS, CONTRACTORS, SUBCONTRACTORS, REPRESENTATIVES, SUCCESSORS, ASSIGNS AND VOLUNTEERS OF EACH OF THE FOREGOING ENTITIES) USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A POSSIBILITY THAT YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY THAT CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE WAIVING YOUR CHILD'S RIGHTS AND YOUR RIGHT TO RECOVER FROM THE RELEASED PARTIES. THE NOTICE ABOVE IS ALSO GIVEN AND IS APPLICABLE TO LEGAL GUARDIANS AND THEIR MINOR WARD(S) WHO YOU ARE AGREEING TO LET ENGAGE IN POTENTIALLY DANGEROUS ACTIVITIES. ALL REFERENCES TO "CHILD" ABOVE ARE APPLICABLE TO YOUR MINOR WARD(S) AND YOUR AND YOUR WARD'S RIGHTS TO RECOVER FROM THE RELEASED PARTIES.

7. **SUPERVISION:** A companion/adult (over 21 years of age) is required to attend with the participants. This companion will be responsible for the participants at all times. The organizers (ICU & FMPGA) are not responsible for supervising my child.
8. **RESPONSIBILITY DISCLOSURE NOTICE:** The organizers (ICU & FMPGA) act only as an agent in connection with the tour offered here and its liability is limited. Travel services, including air transportation, ground transportation, hotel accommodation, restaurants and related services, are provided by independent third parties that are not under the control of the organizers. The organizer will NOT bear any liability to the passenger or any person who claims for or to through the passenger for any injury, damage, loss, delay, or irregularity that may be caused either by the acts or defaults of any company or person dedicated to transporting passengers or carrying out the arrangements of the tour and / or events, venues, places, etc. as a direct or indirect result of nature, fire hazards, machinery or equipment breakdown, acts of governments or other authorities, civil unrest, strikes, riots, acts of terrorism, theft, unsanitary conditions, theft, epidemics, quarantine, medical or customs regulations, or any other cause beyond the control of the organizers (ICU & FMPGA). The organizers (ICU & FMPGA) will not be responsible for losses or additional expenses due to delays or changes in the schedule or other causes. The right is reserved to decline, accept or retain any tour passenger should the health or general deportment of said person impede with the operation of the trip to the detriment of other passengers.

Baggage is transported at the owner's risk and expense and baggage insurance is strongly recommended.

- 9. MEDICAL RELEASE:** I/we authorize to procure at my/our expense, any medical care reasonably required by my/our child during his/her visit to hospitals or facilities chosen by us. I/We have listed below any medication that my/or our child is currently taking. I/we will ensure that my/our child brings the medication with him/her to school/club/team and that my/our child is responsible for taking the medication. I/we have also listed below any medication my/our child is allergic to (please indicate below)
- 10. COVID-19 AND ANY OTHER COMMUNICABLE OR INFECTIOUS DISEASE: WAIVER OF LIABILITY, WAIVER OF CLASS ACTION, BINDING ARBITRATION, AND OTHER PROVISIONS:** In arranging for, and in consideration of, your child or ward to participate in the Competition Event, and in consideration of being able to visit and/or, transportation and activities, I accept, understand and acknowledge, on my own behalf and on behalf of any person using a ticket, pass or reservation made by me, as follows (collectively, "COVID -19 and Other Provisions on Communicable/Infectious Diseases"):
- 11. Assumption of Risk:** I, on behalf of myself and my child or ward, acknowledge that there is an inherent risk of exposure to COVID-19 disease (as defined by the World Health Organization and any strains, variants or mutations thereof) and SARS-CoV-2 (the virus that can cause COVID-19) (collectively, "COVID-19"), and any other communicable or infectious disease, exists in any public place where people are present. "Communicable disease" means any disease caused by microorganisms such as bacteria, viruses, parasites or fungi that can spread, directly or indirectly, from one person to another. "Infectious disease" means any disease caused by microorganisms such as bacteria, viruses, parasites, or fungi that enter the body, multiply, and can cause infection. COVID-19 is an extremely contagious disease that can lead to serious illness and death. No precaution can eliminate the risk of exposure to COVID-19, and the risk of exposure applies to everyone. According to the Centers for Disease Control and Prevention ("CDC"), older adults (people over the age of 65) and people of any age who have underlying medical conditions may be at increased risk of severe illness and death by COVID-19. I, on behalf of myself and my child or ward, acknowledge that the risk of exposure to COVID-19 and any other communicable or infectious disease includes the risk that I, my child or ward, will expose others that I or my child or ward we find later, even if my child or I are not experiencing or displaying any symptoms of illness.
- I, on behalf of myself and my child or ward, agree to voluntarily assume all risks in any way related to exposure to COVID-19 and any other communicable or infectious disease, including illness, injury, or death to myself or my child or conservatee or others, including without limitation, all risks based on the sole, joint, active or passive negligence of any of the above Released Parties. I acknowledge that my visit and participation are entirely voluntary.
- 12. Waiver:** On my own behalf and on behalf of my child, ward, heirs, executors, personal representatives, administrators and assigns, agree to forever waive, covenant not to sue, release and release the Released Parties, named above, from any and all Claims arising out of or in any way related to exposure to COVID-19 and any other communicable or infectious disease during my visit to and/or transportation and activities.
- This waiver of liability and assumption of risk set forth above is intended to be as broad and inclusive as permitted by law.
- 13. Acknowledgment of presumption of risk and waiver by other users:** I attest, acknowledge and agree that any person for whom I have purchased a ticket or pass or made a reservation or who uses a ticket, pass or reservation made by me has independently and carefully read this COVID-19 and Other Communicable/Infectious Diseases and has I acknowledge that I have knowingly and independently agreed to all of its provisions, including without limitation (1) voluntarily assuming any and all risks related to exposure to COVID-19 and any other communicable or infectious disease, including illness, injury, or death of itself, or others, and including without limitation, all risks based on the sole, joint, active or passive negligence of any of the aforementioned Released Parties, and (2) agree, on its own behalf and on behalf of their heirs, executors, personal representatives, administrators and assigns, the forever waiver, the covenant not to sue, release and license the Released Parties, mentioned s above, from any and all Claims, arising out of or in any way related to exposure to COVID-19 and any other communicable or infectious disease during your visit and/or, transportation and activities.
- 14. Third Party Beneficiaries:** I acknowledge and agree that any person for whom I have purchased a ticket or pass or made a reservation or who uses a ticket, pass or reservation made by me is and is intended to be a third party beneficiary of that ticket, pass or reservation made by me.
- 15. Indemnification/Insurance:** On behalf of myself and my child or ward, their heirs, executors, personal representatives, administrators, and assigns, I agree to indemnify and hold each of the Released Parties harmless from and against any and all Claims made or incurred by any person, including myself, my child or ward, and any person using a ticket, pass or arrangement made by me, arising out of or in any way connected with my purchase of an admission ticket(s) or pass(es) and/or my making a reservation(s), and subsequent visit and/or, transportation and activities and arising from any and all of the risks described above in the section

titled Presumption of Risk or otherwise related to exposure to COVID-19 and any other communicable or infectious disease, wherever such activities occur and whether they have been suffered before, during or after such participation. My indemnification obligations shall include, without limitation, all attorneys' fees and costs incurred by either Released Party through and including any appeals. I understand and agree that I am not relying on the Released Parties to have arranged, or carry, any insurance of any kind for my benefit relating to my child's or ward's visit to and/ or transportation and activities and that I am solely responsible for to obtain any mandatory or desired life, travel, accident, property or other insurance related to my child's or ward's visit and/or, transportation and activities, at my own expense.

By signing below, I certify that: (1) I have fully and completely read and understand this Form; (2) I am 18 years of age or older; (3) I am the legal guardian of the minor identified above; (4) the above information regarding my child or ward is true and complete; and (5) I consent and agree to all of the foregoing on behalf of myself and my minor child or ward identified above.

Medications my/our child is taking (if any):

Medications my/our child is allergic to (if any):

Organization/Team Name (of child):

Name of Minor:

X _____

Signature of Parent(s) or Legal Guardian(s)

Date

Witness

Date

EMERGENCY INFORMATION: (Not traveling with the minor)

Name: _____ Address: _____

Telephone: (____) _____ (home) (____) _____ (work)

EACH PARENT OR LEGAL GUARDIAN OF A MINOR PARTICIPATING IN THE EVENT MUST COMPLETE THIS FORM AND TURN IT IN TO THE COACH TO BE DELIVERED TO THE COMPETITION OFFICE BY THE TEAM HEAD COACH