Lewisville Independent School District

The Colony High School 4301 Blair Oaks Road The Colony, Texas 75056 (469) 713-5178

physicians to treat a student.

To Whom It May Concern:	
I hereby give my consent for his/her school in cheerleading activities member, to other schools and activities.	and to accompany the cheerleading squad, as a
physician of its choice, such medical att of the student, if he/she is injured or ill	e school or its representative to obtain, through a ention as is reasonably necessary for the welfare while in the course of school activities. I ally responsible for any injury which may occur.
Date	Signature of Parent/Guardian
Insurance Company	Parent/Guardian (please print)
Policy Number	Address
Notary	City, State, Zip
My Commission Expires	Emergency Phone # (day & night)
This student is allergic to:	
This form must be completed and on file allowed to practice or participate.	e with the sponsor before any student will be
It is essential that this authorization form	n be notarized in order for most hospitals or

INHERENT RISKS OF CHEERLEADING

Cheerleading is a sport and with any sport there is risk of injury. Cheerleading is an anaerobic/aerobic activity that includes jumping, stunting, motions, and tumbling. All physicals and medical releases must be on file with the coaches before the student can participate in the sport, practices or games. Coaches should be informed of any injury or chronic conditions.

Although the probability of injury is minimized if you practice correctly, there is always the possibility of one occurring. Injuries that can occur in cheerleading include but are not limited to the following: blisters, muscle strains, ligament sprains, joint and muscle soreness, abrasions, contusions, stress fractures, broken bones, spinal cord injuries involving paralysis and even death. However, if you take certain precautions, the possibility of such injuries may be largely decreased. Be sure to abide by the following:

- 1. **Never** stunt or tumble unless a coach is present.
- 2. Always practice in the presence of a qualified coach.
- 3. Always warm-up appropriately before cheering (practice and games) by jogging and stretching.
- 4. Do not attempt a stunt that you do not know how to perform safely and that has not been cleared by the coach.
- 5. Always use attentive spotters when stunting.
- 6. Always use mats or a grassy area when stunting during practice.
- 7. Always cheer in an area free from obstructions.
- 8. Do not stunt on uneven ground, wet surfaces, and concrete. Do not stunt in cold or rainy weather.
- 9. Never talk, laugh, or mess around when performing a stunt or learning a stunt.
- 10. Report injuries to the coach as soon as they occur.
- 11. Follow all trainer and doctor recommendations.
- 12. **Lift weights and maintain proper conditioning** to increase strength and guard against injuries.
- 13. Always wear shoes and clothing appropriate for cheerleading.
- 14. Never wear jewelry of any kind or chew gum when cheering including practices and games.
- 15. Always have your hair pulled back from your face and shoulders.
- 16. Eat **nutritious** meals and get plenty of rest.
- 17. Always ask for assistance or advice at any time.
- 18. Take all activities seriously.

I have read the preceding warning. I understand the assumption of risks inherent in cheerleading participation. I acknowledge that I am physically fit and voluntarily participating in the activity of cheerleading.

STUDENT SIGNATURE	DATE			
DARENT GIGNATURE	D.A.TIE			
PARENT SIGNATURE	DATE			

TCHS CHEER BOOSTER CLUB

Photography Consent Form for 20-21

TCHS Cheer Media Coordinator

I, hereby grant permission to the Media Coordinator for the TCHS Cheer Booster Club, the irrevocable right to use any images of my daughter/son, pertaining to all TCHS cheerleading
events/activities/games/fundraisers in all forms of media and in all manners, including electronic
media (TCHS Cheer website), Newspaper Publication and/or lawful purposes.
❖ When publishing her/his name on the website, I would prefer only the following be used:
☐ First Name and Last Name
☐ First I <mark>nitial, Last Name</mark>
☐ Last I <mark>nitial, First Name</mark>
☐ First Name Only
☐ Last Name Only
□ No Name At All
. When publishing bor/his name in the newspapers/aparts magazine// ISD newslatters.
When publishing her/his name in the newspapers/sports magazine/LISD newsletters, I would prefer only the following be used:
would project only the following be doed.
☐ First Name and Last Name
☐ First I <mark>nitial,</mark> Last Name
☐ Last I <mark>nitial,</mark> First Name
☐ First Name Only
□ Last Name Only
☐ No Name At All ——————————————————————————————————
(Signature of Parent or Guardian - if subject under 18 yr. old)
Address:
Phone:

Thank You!

LEWISVILLE INDEPENDENT SCHOOL DISTRTCT STUDENT ATHLETE TRAVEL INFORMATION

EMERGENCY INFORMATION

Student's Name			_ Birthdate
Address			, TX
Phone	Social Security #		_Sex () Male () Female
Parent's Name – Mother		Father_	
Parent's Employer-Mother		Father_	
Daytime Phone(s)-Mother_		_ Father_	
If parent/guardian cannot b	be reached, please notify:		
INSURANCE INFORMA		ame	Phone
Family Primary Insurance Company			Phone
Circle One: <u>Individual</u> <u>Gr</u>	roup <u>HMO</u> None Policy #		Group #
Primary Physician			_Phone
Insured Parent/Guardian's	Name		_Employer
List any known ALLERGI	ES. (Medications, Foods, E	tc.) Be Spe	ecific:
List any Medication taken	on a regular basis:		
received by the above parti	NOT be responsible for me cipant except to provide the pate in any practice, off-sear	dical or oth	ner costs related to injuries coverage outlined. No student m or contest prior to this
I hereby give my consent f Interscholastic League app school on any trips.		the coach	or other representative of the
and treatment as a result of such care and treatment as or school representative: an	Fany injury or sickness, I do may be given to said studen and I do hereby agree to inde- tive from any claim by any p	hereby red t by any pl mnify and	ve student needs immediate care quest, authorize, and consent to hysician, trainer, nurse, hospital, save harmless Lewisville ISD msoever on account of such care
Parent/Guardian Signature	Date St	udent Sign	ature Date

SOCIAL MEDIA CONTRACT

Social Media, such as Snapchat, Twitter, Facebook, Instagram, Pinterest, Tumblr, YouTube, KiK, WhatsApp, blogs, and others, are powerful tools of communication that have significant impact on your personal reputation as well as the reputation of TCHS Cheer. You and your parent/guardian must read and sign this contract acknowledging your responsibility to use Social Media responsibly as a member of TCHS Cheer. You are committing to following the guidelines below when using Social Media.

- ✓ Always be authentic (disclose and use your own identity). If you post personally, or on as TCHS Cheer, make sure you are aware of the Standards of Conduct stated in the TCHS Student Handbook as you share your personal views about yourself, other students, school personnel, or the school. Never post false, inaccurate or misleading information that could be taken as truth.
- ✓ Never pretend to be someone else when you post personally or as TCHS Cheer. Tracking tools enable supposedly anonymous posts to be traced back to the authors. Always be honest about yourself and views without providing personal information that could be used against you. Do not share information that could endanger you or someone else.
- √ Think twice before posting. Privacy does not exist in the world of Social Media. Consider what would happen
 if a post becomes widely known, and how that may reflect on your reputation, the reputation of your family
 and friends, the reputation of another student, and the reputation of TCHS or TCHS Cheer. Moreover, the
 information you place online could jeopardize your future when applying to college or even applying for a
 job. Colleges and employers are increasingly conducting online searches of applicants.
- √ Be respectful and thoughtful. As a student of TCHS Cheer, be mindful of the school's commitment to showing respect and dignity for all people and to the civil and thoughtful discussion of opposing ideas. Refrain from negativity and putting-down, criticizing and demeaning others. Abstain from posting any objectionable content that could be considered obscene, threatening, hostile, indecent or offensive, including written and graphic material. Treat others the way you would like them to treat you while posting on Social Media sites.
- √ Know the rules. Follow a code of ethics. Become familiar with the terms of service and policies of the Social Media sites and networks in which you participate and the appropriate code of ethics required for responsible online communications.
- ✓ Always remember that Cyber Bullying is the willful and repeatedly bullying or harassment of another person or persons' through the medium of Social Media, which includes, electronic text. Students who engage in Cyber Bullying on Social Media sites, including electronic text, may be subject to discipline by TCHS administrators and, if necessary, by The Colony Police Department as CYBERBULLYING is ILLEGAL. Remember the Golden Rule: "Do unto others as you would have them do unto you" when you post on any Social Media site.
- √ Should you receive any information regarding any possible danger or threat to the school, <u>DO NOT</u>
 <u>CREATE A POST OR FORWARD IT</u>. If at school, alert a teacher, counselor or administrator immediately. If at home, tell a parent and have them contact LISD or the Police. Forwarding any post that could cause alarm, widespread panic and emergency response could be a criminal offense.
- √ Should you violate any of these guidelines, not only are you violating TCHS's Student Code of Conduct, but your actions could also be criminal. By following these guidelines not only are you demonstrating good moral character, but you're also protecting yourself from criminal liabilities. Feel free to contact TCHS School Resource Officer (SRO) should you have any questions about the criminal aspects/penalties related to the misuse of Social Media. The following Texas Penal Code references apply to the types of offenses applicable to misuse of Social Media:
 - Sec 33.07 Online Impersonation (up to 3rd degree Felony)
 - Sec 42.06 False Alarm or Report (up to 3rd degree Felony)

	on of Cert. Visual. Material (up to Class A Misdemeanor)
*By signing this contract, I agree to u	uphold all of the above guidelines!
Student Signature	Parent Signature



Witness Signature:_

Address

NCA and NDA SUMMER CAMP **PARTICIPANT** RELEASE AND WAIVER



Type: PWI

Every Participant must have a completed and signed release form to turn in at registration on the first day of camp to participate. <u>ALL areas must be completed</u>. Please photocopy and distribute to each person attending. Coach must retain a copy of each form to keep them with the team throughout the event.

Minor's Name		Name of Parent / Legal Guar	dian	- (Camp Dates	Graduation Year
Address		Parent/Legal Guardian Cell F	Phone Number	 [Location where you will	attend camp, City, State
City, State & Zip		Parent/Legal Guardian Emai	l Address		School/Group Name	
Phone Number		Parent/Legal Guardian Home	e Phone Number	r S	School/Group Address,	City, State, Zip
Participant Email Address ☐ Yes, you have my perm	ission to send me upd	ates/newsletters from Vars	ity!	ı	Participant Type: ☐ Cheer	□ Dance
.iability Release. For good and v	raluable consideration, the re	eceipt and sufficiency of which a	are hereby acknow	rledged, I	,	, as a parent or legal guardian of
, a minimum and	onal Dance Alliance ("NDA".) I, i el, convention center, high scho d employees of Varsity Spirit, Sp udgment, loss, liability, cost and serious, catastrophic and/or dea rither expressly agree to indemr brought by Minor or by any othe	in my own behalf and on behalf of Mino ool) on whose premises the Camp will oonsors, the Location and their respect expenses (including, without limitation thit) that Minor may incur or sustain du hify and hold harmless Releasees and or persons on the account of damages	or, further agree to relifer to cour (hereinafter the affiliates (hereinafters, attorney's fees an uring the Camp, all act Releasees' heirs, sof any character result.	lease and to hold the "Location") the fter collectively "F and costs) arising o ctivities associate uccessors, assign	harmless Varsity Spirit, Varsit e affiliates of Varsity Spirit, the Releasees") from any and all out of or connected with the C old with the Camp and while trans, executors and administrate	ne Location, and the respective directors, iability, whether caused by the negligence amp, including any claim arising out of or aveling to and from the site for the Camp lors against loss from any further claims,
in my own behalf and on behalf of Minor, her eleases Releasees from liability and contains iability Release constitutes a guarantee that the	an acknowledgement of my vol	untary and knowing assumption of the	risk of injury or illne	ess. I, in my own	behalf and on behalf of Mino	
Signature of Parent or Leg	ıal Guardian:			Date	e:	
Medical Release.I, in my own behalf and ny own behalf and on behalf of Minor, acknow reatment of the minor and hereby, in my own I nedical and related bills that may be incurred or	ledge that Minor is assuming the behalf and on behalf of Minor, re	e risk of such illness or injury by partici elease and hold harmless Releasees in	pating in the camp. I the exercises of this	In the event of suc authority. I furth	ch illness or injury, I authorize er acknowledge and understai	Varsity Spirit to obtain necessary medical nd that I will be responsible for any and all
Appearance Agreement. I understar famp, Minor may be included in videotapes, ransfer and grant to Varsity Spirit d/b/a NCA and to utilize such videotapes and photographs inderstand that neither Varsity Spirit nor any thaterials related thereto.	photographs, DVDs, podcasts, and/or NDA, its successors, ass s and Minor's name, face, likene	and videocasts taken during the Cam signees, licensees, sponsors, any televes, voice and appearance as part of the	p. Therefore, withour ision networks, and a camp, in advertising	all other comments and promoting	limitations, I, in my own beha cial exhibitors the exclusive ri the Camp or in advertising an	If and on behalf of Minor, hereby assign, ght to photograph and/or videotape Minor d promoting similar future events. I further
Camp Rules. I further acknowledge and une Camp, and that Minor and I will be respondiles can result in dismissal from Camp with no	sible for his/her/my failure to al	bide by those rules and regulations. M	linor and I have rece	eived, read and u		
nsurance and Payment. We offer Charges due to illness and preexisting injuriensurance, is usually required to obtain medica	es are not covered and will be b	illed directly to the parent). All studer	nts who do not have	insurance must p		
YES, I want the Camper's Acciden	nt Insurance Policy, and I will brin	ng \$6.00 premium to registration at Ca	mp. (Not availab	ole at Home (Camps)	
POLICY NUMBER.		insurance company, in the event of a			checked, complete the informa	ation below. WE MUST HAVE THE
		Inst				
Medical Insurance Policy/Group Nu	ımber - REQUIRED:		Ins	surance Compa	any Phone # :	·
represent that any medication to which Mino and that he/she shall consume the prescribed of Medications (if any):	dosage for such medications. Va		ipply any type of me	edication at cam		ntly taking with him/her to the Camp
Allergic to (if any):						
acknowledge that the Minor suffers from						
Family Doctor:	-)		Minor Birthdate	
Emergency Information:				n Contact Addre		
• • • • • • • • • • • • • • • • • • • •				Il Phone Numb		
	Daytime Telephone: (ne: ()	
, in my own behalf and on behalf of Minor, he hat this Participant Release and Waiver Form of Minor, further acknowledge that nothing in t and of my own free will.	reby warrant that I have read the releases Releasees from liabilit	is Participant Release and Waiver For ty and contains an acknowledgement of	m in its entirety and for f my voluntary and k	fully understand its nowing assumption	s contents. I, in my own beha on of the risk of injury or illnes	s. I, in my own behalf and on behalf
Signature of Parent or Legal Guardian: _			Date:	Relation	onship to Minor:	
I, identified above as Minor, acknowledge Signature of Minor:	that I have read this Release ar	nd Waiver form.	Date:			//

Date:



Parent Permission form

Ι	will be driving my child
home from cheerleading camp at	t SMU on June 3 rd .
I	cannot drive my child
home from cheerleading camp or	n June 3 rd . My child will be riding home with
I agree to hold this parent, coach should occur to my child while in	es, and Lewisville ISD harmless if injury or accident n the care of this parent.
Signature of parent (please sign of	even if you are driving your own child)
Signature of parent driving your (if you cannot take your child ho	

^{*}This form is due to your coach no later than Friday April 29th!