

2021 VARSITY PEARL HARBOR MEMORIAL PARADE PERFORMANCE

REGISTRATION FORM

Please complete this form and return with \$200.00 per person deposit to:
Varsity Pearl Harbor Memorial Parade • P.O. Box 752790 • Memphis, TN 38175-2790.
To return by FedEx or UPS: 6745 Lenox Center Court, Suite 300, Memphis, TN 38115
or email to Chelsea Miller at cmiller@varsity.com (School name begins with A-M) or
Ainslie Franklin at afranklin@varsity.com (School name begins with N-Z).

For any additional information regarding this tour, please call
UCA/UDA at 888-243-3782, 800-326-2383 or NCA/NDA at 800-622-2946.
Make check payable to "Varsity Parade". Deposit due: \$200.00 per person.

Participant name: _____

Full address: _____

Street Address (no P.O. Boxes accepted) City State Zip

Home number: (____) _____ Cell number: (____) _____ Email address: _____

Check one: UCA Cheerleader UDA Dancer NCA Cheerleader NDA Dancer USA Dance/Song/Drill USA Cheerleader UCE Cheerleader

I attended 2021 Varsity Spirit camp at: _____
Name of University or Home Camp Date Attended

Name of your school: _____ School address/city/state: _____

Parent Contact: _____ Email address: _____

Parent Contact: Work Phone: (____) _____ Home Phone: (____) _____ Cell Phone: (____) _____

Tour Chaperone: _____

* The majority of communication is via email. Include any additional email addresses that you would like to receive event information below. Please note that some school servers will not accept our email blast. To insure receipt please include a secondary email address if your primary is a school email address.

Additional email address:

TRAVEL INSURANCE: I PLAN TO: Purchase travel insurance via the internet (www.insuremytrip.com) Get my own travel insurance Not have any travel protection

EXTRA NIGHTS at \$319 per room per night _____

If sending in registrations separately, please list individually any attendees you would like to be roomed close to you:

PLEASE RE-READ THE PAYMENT SCHEDULE, CANCELLATION AND REFUND SECTIONS BEFORE SIGNING THIS CONTRACT.

I/WE HAVE READ THIS BROCHURE AND UNDERSTAND AND ACCEPT ITS CONTENTS:

Participant's Signature Date Daytime Phone

Guardian/Parent Signature Date Daytime Phone

Once you have received your invoice via email you may call our office at 800-238-0286 Option 2 and make your payment via credit card.

CANCELLATIONS AND REFUNDS:

For cancellations received in the Varsity office on or **BEFORE** September 17, 2021, all monies will be refunded with the exception of the \$200.00 deposit. For cancellations in the Varsity office made **BETWEEN** September 18, 2021 and October 22, 2021, an additional \$100.00 per person penalty will apply to cover entertainment guarantees. For cancellations received **AFTER** October 22, 2021, **THERE WILL BE NO REFUNDS.**

**ALL CANCELLATIONS MUST BE IN WRITING TO VARSITY. WE WILL NOT ACCEPT CANCELLATIONS BY PHONE.
EMAILED TO CHELSEA MILLER AT [CMILLER@VARSITY.COM](mailto:cmiller@varsity.com) (SCHOOL NAME BEGINS WITH A-M)
AND AINSLIE FRANKLIN AT [AFRANKLIN@VARSITY.COM](mailto:afranklin@varsity.com) SCHOOL NAME BEGINS WITH N-Z).**

2021 VARSITY PEARL HARBOR MEMORIAL PARADE PERFORMANCE

PRICING & DEPOSITS

TERMS & CONDITIONS

PLEASE READ ALL INFORMATION CAREFULLY, ESPECIALLY THE PAYMENT SCHEDULES AND CANCELLATION POLICY

TOUR COST, RESERVATIONS & PAYMENTS:

The total number accepted for the tour is limited. Completed reservation application and \$200.00 (non-refundable) per person deposit **MUST BE RECEIVED** in the Varsity Spirit OFFICE on or before the dates listed below. You may fax in your registration forms to Varsity. However, **rooms are not guaranteed until deposits or a school purchase order has been received in the Varsity Spirit office.** (Deposits are credited toward your total cost)

PARTICIPANT PRICES:

Quad (4 persons per room), \$1431.00 per person
Triple (3 persons per room), \$1519.00 per person
Double (2 persons per room), \$1681.00 per person
Single rooms are not available for participants.

SPECTATOR PRICES:

Quad (4 persons per room), \$1391.00 per person
Triple (3 persons per room), \$1479.00 per person
Double (2 persons per room), \$1641.00 per person
Single (1 person per room), \$1939.00

Pricing is based on the total number of people in a room regardless if they are a participant or a chaperone. For example, 3 participants and one chaperone in a room would be the quad rate. The participants would pay the Participant quad rate and the spectator/chaperone would pay the Spectator/Chaperone Quad rate.

If you attended camp in June/July, deposit deadline is August 20, 2021.

If you attended camp in August, deposit deadline is September 17, 2021.

After September 17, please call the Varsity Spirit office for availability.

• **EXTRA NIGHTS:** A limited number of rooms are available before or after the event at \$319 per ROOM per night. Please indicate if you wish to purchase an extra night.

CHAPERONES: ONE ADULT CHAPERONE FOR EVERY 3 PARTICIPANTS. VARSITY IS NOT RESPONSIBLE FOR SUPERVISING THE PARTICIPANTS!

FINAL PAYMENT IS DUE IN THE VARSITY SPIRIT OFFICE ON OR BEFORE OCTOBER 22, 2021. UNIFORMS WILL NOT BE SHIPPED UNTIL THE BALANCE OF PAYMENT IS MADE.

PLEASE NOTE: If final payment is not received by October 22, 2021, and the special written arrangements are not made with Varsity PRIOR to the October 22 deadline, tour participants will automatically be removed from the tour, which will result in a complete forfeiture of all monies paid.

CANCELLATIONS AND REFUNDS:

For cancellations received in the Varsity office on or before September 17, 2021, all monies will be refunded with the exception of the \$200.00 per person deposit. For cancellations received in the Varsity office between September 18, 2021 and October 22, 2021, an additional \$100.00 per person penalty will apply to cover entertainment and hotel guarantees. For cancellations after October 22, 2021, no refunds will be made. **NO EXCEPTIONS.** All cancellations must be in writing to Varsity, emailed to Chelsea Miller at cmiller@varsity.com (School name begins with A-M) and Ainslie Franklin at afranklin@varsity.com (School name begins with N-Z). We will not accept cancellations by phone.

TOUR ORGANIZER:

This tour is being organized for select participants of the National Cheerleaders Association, National Dance Alliance, Universal Cheerleaders Association, Universal Dance Association, and United Spirit Association, Urban Cheerleading Experience, divisions of Varsity Spirit LLC.

Varsity Spirit address is
6745 Lenox Center Ct, Suite 300
Memphis, TN 38115

CONFIRMATION:

After completed reservation application and deposit are received, a reservation confirmation will be sent to you via email. Once confirmation is received, those paying by credit card may call the office at 800-238-0286 Option 2 to submit payment.

FLIGHT ARRANGEMENTS TO HONOLULU:

If you plan to fly from your home to Honolulu, we suggest you use ALTOUR to make your flight arrangements. If there are flight delays or weather cancellations on arrival or departure days, we will be able to accommodate you better with tickets purchased through ALTOUR. ALTOUR'S telephone number is **1-866-719-0379**. (ALL flights must arrive into the Honolulu International Airport – HNL.)

RESPONSIBILITY DISCLOSURE NOTICE:

Varsity Spirit LLC, D.B.A UNIVERSAL CHEERLEADERS ASSOCIATION, NATIONAL CHEERLEADERS ASSOCIATION, NATIONAL DANCE ALLIANCE, UNIVERSAL DANCE ASSOCIATION AND UNITED SPIRIT ASSOCIATION, URBAN CHEERLEADING EXPERIENCE, divisions of Varsity Spirit LLC, act only as an agent in connection with the tour offered herein and its liability is limited. The travel services including air transportation, carriage by land, hotel accommodations, restaurants, and related services are provided by independent third parties not under the control of Varsity Spirit LLC. Varsity Spirit LLC shall NOT bear any liability to the passenger or any third party for any injury, damage, loss, accident, delay, or irregularity which may be occasioned either by reason or any defect, through the acts of defaults of any company or person engaged in conveying the passengers or in carrying out the arrangements of the tour and/or performance events, venues, etc. as a direct or indirect result of acts of God, dangers incident to fire, breakdown in machinery or equipment, acts of governments or other authorities, acts of terrorism, civil disturbances, strikes, riots, theft, unhealthy conditions, pilferage, epidemics, quarantines, medical, or customs regulations, or from any other causes beyond the control of Varsity Spirit LLC. Varsity Spirit LLC shall not be liable for any losses or additional expenses due to delay or changes in schedule or any other causes. The right is reserved to decline, to accept, or to retain any tour passenger should such person's health or general deportment impede the operation of the tour to the detriment of other passengers. No refunds for tour portions or unused services can be made unless agreed prior to the scheduled deadlines. Your retention of tickets, reservations, or bookings after issuance shall constitute a consent to the above and agreement on your part to convey the contents herein to your traveling companions. Payment of any deposit of final payment shall be deemed to constitute consent by each passenger to these terms. Baggage is carried at the owner's risk and baggage insurance is strongly recommended. It is also recommended that each participant in this tour have his or her own attorney review this RESPONSIBILITY DISCLOSURE NOTICE before indicated his or her consent by signing the reservation form.

2021 VARSITY PEARL HARBOR MEMORIAL PARADE PERFORMANCE

ROOMING LIST

ROOMING LISTS (IMPORTANT: This form must be filled out completely in order for your registration to be accepted. Reservation will be entered according to the dates below and charged as such. List below names in full of people staying in each room. **Please Note: Rollaway beds are not available.**

(PLEASE PRINT OR TYPE)

Performer/Team Name _____

THE COACH / MAIN CONTACT RESPONSIBLE FOR FILLING OUT THIS ROOMING LIST FORM.

Please check the boxes which are applicable, letting Varsity know if you are a performer or spectator, male or female. You may have spectators and performers room together. If necessary, please make additional copies to accommodate large room needs.

- Varsity is not responsible for the physical make-up of the rooming list. For team registration, all inquiries from parents will be directed to the main contact.
- No performers allowed in single rooms.
- Package includes arrival December 4th and departure December 8th. (Please note below early arrival or late departure.)

P = Performer S = Spectator C = Coach/Advisor M = Male F = Female

ROOM 1	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

ROOM 5	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

ROOM 2	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

ROOM 6	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

ROOM 3	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

ROOM 7	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

ROOM 4	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

ROOM 8	Child Age	P	S	C	M	F
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arrival Date: _____		Departure Date: _____				

Total Extra Room Nights (\$319) per group: _____

2021 VARSITY PEARL HARBOR MEMORIAL PARADE

RULES OF CONDUCT AND BEHAVIOR

There will be many girls, boys, parents, and Varsity Spirit staff traveling to Honolulu as part of this event. We are looking forward to a great event, and would like to take this opportunity to assure all parents that our main concern is each participant's safety. Therefore, we have established the following rules of conduct and behavior for each participant while on tour. Each participant is representing their state, hometown, school, and most of all, family and themselves.

Varsity Spirit, asks each participant and their parents to carefully read and understand the necessity of following these rules. Parents and participants must both sign this form and return it (with registration and other attached forms) to the Varsity Spirit office. Please remember that we want you to have a great time, but within the parameters of this agreement.

1. A chaperone/adult (age 21 and over) is required to attend with participants. This chaperone will be responsible for participants outside of scheduled rehearsals and performances (free time) including but not limited to swimming, free time at event site or hotel.
2. Varsity Spirit is not responsible for participants on their free time.
3. It is my responsibility to learn my routine from the video sent to me and to pack and bring all of my uniform to Honolulu.
4. I understand that during the independent or free time on this tour, I will be able to sightsee or shop with my chaperone.
5. The use of alcohol and/or any other controlled substance is strictly PROHIBITED AND FORBIDDEN. No smoking is allowed. Failure to comply will result in immediate dismissal and a letter to your coach and principal.
6. I will be expected to be on time for all tours, sightseeing excursions, rehearsals, and performances.

I understand and agree that any infraction of these rules and conditions could cause my immediate expulsion from the tour and result in my being sent home at my parent's expense without refund for unused portions of the trip.

Participant's Signature

Date

Parent's Signature

Date

To be completed and returned for participants only.
RETURN TO: Varsity Pearl Harbor Memorial Parade
6745 Lenox Center Ct., Suite 300, Memphis, TN 38115

**IF YOU FAIL TO COMPLETE ANY PART OF THIS FORM, IT WILL BE RETURNED TO YOU FOR COMPLETION,
PRIOR TO ACCEPTANCE.**

2021 VARSITY PEARL HARBOR MEMORIAL PARADE PERFORMANCE

Please complete this form and return to:
Varsity Pearl Harbor Memorial
6745 Lenox Center Court, Suite 300
Memphis, TN 38115

UNIFORMS

(You may duplicate this form.)

FOR MEASURING TIPS PLEASE GO TO HAWAII.VARSITY.COM AND CLICK ON UNIFORMS IN THE DROP DOWN.

It is very important that each participant measures correctly for these uniforms. Please watch the video instructions on our websites. Even if you already purchase Varsity Uniforms, every uniform style measures differently. Exchanges may not be available for this event. The uniform is made with MotionFLEX® material. This fabric fits tighter than traditional polyester uniforms. **We recommend if you measure in between sizes to go larger.**

School Team Name _____

City _____ State _____

DETERMINING YOUR UNIFORM SIZE

DO NOT TAKE YOUR OWN MEASUREMENTS!

When being measured, wear the same undergarments you normally wear under your uniform.

- **WAIST:** measure snugly around body at waistline.
- **BUST/CHEST:** With arms raised to shoulder level, measure around the fullest part of the chest.
- **HIPS:** Measure around the fullest part of the hips.

Participant or Non-Participant: (Souvenir T-shirt)

(Please indicate number of each)

_____ Youth Med. (10-12) _____ Youth Lg. (14-16) _____ Small _____ Medium

_____ Large _____ X-Large _____ XX-Large _____ 3X-Large

Names of Traveling Non-Participants (on the tour package):

PARTICIPANTS UNIFORM SIZE(S):

Name	Age	Male or Female	Top Size	Pant/Skirt Size

FEMALE TOP SIZING CHART*

RECOMMENDED SIZE	BUST MEASUREMENT
XS	27" or below
S	28"-30"
M	31"-33"
L	34"-36"
XL	37"-39"
2XL	40"-42"
3XL	43"-45"

FEMALE SKIRT SIZING CHART*

SIZE	HIPS
2XS	31" or below
XS	32"-33"
S	34"-35"
M	36"-37"
L	38"-39"
XL	40"-41"
2XL	42"-43"
3XL	44"-45"

MALE TOP SIZING CHART

RECOMMENDED SIZE	CHEST MEASUREMENT
34	29"-30"
36	31"-32"
38	33"-34"
40	35"-36"
42	37"-38"
44	39"-40"
46	41"-42"
48	43"-44"
50	45"-46"
52	47"-48"

MALE PANT SIZING CHART

RECOMMENDED SIZE	WAIST	HIPS
S	28"-30"	37"-39"
M	31"-33"	40"-42"
L	34"-36"	43"-45"
XL	37"-39"	46"-48"

All male pants will be shipped unhemmed to ensure proper length

ADDRESS: For uniforms to be shipped via FedEx or UPS

Name: _____

Street Address (No P.O. Box numbers) _____

City _____ State _____ Zip _____ Phone # (____) _____

*Motionflex tops and skirts run smaller than polyester uniforms. If you are comparing to another Motionflex uniform that you have, note that parade uniforms will not be as tight as competition uniforms. Please select size based on the chart, and do not focus on other clothing or uniforms for sizing comparison.

2021 Varsity Spirit Pearl Harbor Memorial Parade

ADULT Release and Waiver Form

Adult's Name _____
(Please Print)
Address _____
City _____ St _____ Zip _____
Phone _____
School Name _____

Liability Release: For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, I agree to participate in the Varsity Spirit Pearl Harbor Memorial Parade ("the Event") on or about December 4-8, 2021 to be conducted by Varsity Spirit LLC ("Varsity Spirit"), d/b/a Universal Cheerleaders Association ("UCA"), d/b/a Universal Dance Association ("UDA"), d/b/a National Cheerleaders Association ("NCA"), d/b/a National Dance Association ("NDA"), d/b/a United Spirit Association (USA) and d/b/a Urban Cheerleading Experience ("UCE"). I further agree to release and to hold harmless Varsity Spirit, the Hosting site (university, hotel, convention center, high school) on whose premises the Event will occur (hereinafter the "Location") and the Event officials, Varsity Spirit's Corporate Sponsors (hereinafter "Sponsors") and production staff (hereinafter "Varsity's Event Agents") the affiliates of Varsity Spirit, Sponsors, vendors, contractors, Location and the Event Agents, and the respective directors, officers, representatives, members, agents and employees of Varsity Spirit, the Location, Event Agents and their respective affiliates (hereinafter collectively "Releasees") from any and all liability whether caused by the negligence of the Releasees or otherwise for any claim, judgment, loss, liability, cost and expenses (including, without limitations, attorney's fees and costs) arising out of or connected with the Event, including any claim arising out of or connected with any illness or injury (minimal, serious, catastrophic and / or death) that may incur or sustain during the Event, all activities associated with the Event and while traveling to and from the site for the Event whether or not the Event actually occurs. I further expressly agree to indemnify and hold harmless Releasees and Releasees' heirs, successors, assigns, executors and administrators against loss from any further claims, demands or actions that may subsequently be brought by me or by any other persons on the account of damages of any character resulting to me in any way from the foregoing activities. I further agree to reimburse and to make good to Releasees any loss or costs Releasees may have to pay as a result of any such action, claim or demand.

I hereby warrant that I have read this Liability Release in its entirety and fully understand its contents. I am aware that this Liability Release releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I further acknowledge that nothing in this Liability Release constitutes a guarantee that the Event will occur. I have signed this document voluntarily and of my own free will.

Signature Adult: **X** _____ Date: _____

Medical Release: I acknowledge and agree that such participation subjects me to possibility of physical illness or injury (minimal, serious, catastrophic and/ or death) and that I acknowledge that I am assuming the risk of such illness or injury by participating in the Event. In the event of such illness or injury, I authorize Varsity Spirit to obtain necessary medical treatment for me and hereby release and hold harmless Releasees in the exercises of this authority. I further acknowledge and understand that I will be responsible for any and all medical and related bills that may be incurred by me for any illness or injury that I may sustain during the Event and while traveling to and from the site for the Event whether or not the Event actually occurs.

Supervision: I acknowledge that Varsity Spirit and/or Releasees are not responsible for supervising me.

APPEARANCE AGREEMENT: I understand Varsity will arrange for photography during the Event which may include me and that Varsity will arrange the proposed videotapes, DVD's, podcasts and videocasts that may feature the Event (the "Programs"). I hereby grant Varsity, their successors, assignees, licensees, sponsors, and all other commercial exhibitors the exclusive right to photograph and/or video tape me and further utilize my name, event participation, hometown, face, likeness, voice and appearance as part of the Programs, or in any other media now in existence or hereafter developed, in advertising and promoting the Programs and in advertising and promotions relating to Varsity without reservation or limitation. In granting this license, I understand that Varsity is under any obligation to exercise any of their rights, licenses and privileges herein granted. I waive any right to inspect or approve the Programs, copies thereof and any promotional materials related thereto.

Responsibility Disclosure Notice: Varsity Spirit acts only as an agent in connection with the tour offered herein and its liability is limited. The travel services including air transportation, carriage by land, hotel accommodations, restaurants, and related services are provided by independent third parties not under the control of Varsity Spirit. Varsity Spirit shall not bear any liability to the passenger or any third party for any injury, damage, loss, accident, delay, or irregularity which may be occasioned either by reason of or through the acts or defaults of any company or person engaged in conveying the passengers or in carrying out the arrangements of the tour and/or performance events, venues, etc. as a direct or indirect result of acts of God, dangers incident to fire, breakdown in machinery or equipment, acts of governments or other authorities, civil disturbances, strikes, riots, acts of terrorism, theft, unhealthy conditions, pilferage, epidemics, quarantines, medical or customs regulations, or from any other cause beyond the control of Varsity Spirit. Varsity Spirit shall not be liable for any losses or additional expenses due to delay or changes in schedule or other causes. The right is reserved to decline, to accept, or to retain any tour passenger should such person's health or general deportment impede the operation of the tour to the detriment of other passengers. No refunds for your portions of unused services can be made unless agreed to prior to the scheduled deadlines. Your retention of tickets, reservations, or bookings after issuance shall constitute a consent to the above and agreement on your part to convey the contents herein to your traveling companions. Payment of any deposit or final payment shall be deemed to constitute consent by each passenger to these terms. Baggage is carried at the owner's risk and baggage insurance is strongly recommended. It is also recommended that each participant in this tour have his or her own attorney review this RESPONSIBILITY DISCLOSURE NOTICE before indicating his or her consent by signing this consent form.

I represent that any medication to which I am allergic or medications that I am currently taking are listed below. I agree that I shall bring medications which I am currently taking with me to the Event and that I shall consume the prescribed dosage for such medications.

Medications (if any): _____

Allergic to (if any): _____

I acknowledge that I suffer from the following conditions: _____

School Name (of participant) _____

EMERGENCY INFORMATION: (Not traveling with you)

Name: _____ Address _____

Telephone (_____) _____ (home) (_____) _____ (work)

I hereby warrant that I have read this Adult Release and Waiver Form in its entirety and fully understand its contents. I am aware that this Adult Release and Waiver Form releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I further acknowledge that nothing in this Adult Release and Waiver Form constitutes a guarantee that the Event will occur. I have signed this document voluntarily and of my own free will.

Signature of Adult: **X** _____ Date: _____

Every adult on the tour package must complete this form and return to Varsity's office with the initial registration.

2021 Varsity Spirit Pearl Harbor Memorial Parade

MINOR Release and Waiver Form

Minor's Name _____
(Please Print)
Address _____
City _____ St _____ Zip _____
Phone _____
School Name _____

Liability Release: For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, I _____, as parent or legal guardian of _____, a minor (hereinafter "Minor"), hereby grant the permission necessary to allow Minor to participate in the Varsity Spirit Pearl Harbor Memorial Parade ("the Event") on or about December 4-8, 2021 to be conducted by Varsity Spirit LLC ("Varsity Spirit"), d/b/a Universal Cheerleaders Association ("UCA"), d/b/a Universal Dance Association ("UDA"), d/b/a National Cheerleaders Association ("NCA"), d/b/a National Dance Association ("NDA"), d/b/a United Spirit Association (USA) and d/b/a Urban Cheerleading Experience ("UCE"). I, in my own behalf and on behalf of Minor, further agree to release and to hold harmless Varsity Spirit, the Hosting site (university, hotel, convention center, high school) on whose premises the Event will occur (hereinafter the "Location") and the Event officials, Varsity Spirit's Corporate Sponsors (hereinafter "Sponsors") and production staff (hereinafter "Varsity's Event Agents") the affiliates of Varsity Spirit, Location and the Event Agents, and the respective directors, officers, representatives, members, agents and employees of Varsity Spirit, Sponsors, vendors, contractors, the Location, Event Agents and their respective affiliates (hereinafter collectively "Releasees") from any and all liability whether caused by the negligence of the Releasees or otherwise for any claim, judgment, loss, liability, cost and expenses (including, without limitations, attorney's fees and costs) arising out of or connected with the Event, including any claim arising out of or connected with any illness or injury (minimal, serious, catastrophic and / or death) that Minor may incur or sustain during the Event, all activities associated with the Event and while traveling to and from the site for the Event whether or not the Event actually occurs. I further expressly agree to indemnify and hold harmless Releasees and Releasees' heirs, successors, assigns, executors and administrators against loss from any further claims, demands or actions that may subsequently be brought by Minor or by any other persons on the account of damages of any character resulting to Minor in any way from the foregoing activities. I further agree to reimburse and to make good to Releasees any loss or costs Releasees may have to pay as a result of any such action, claim or demand.

I, in my own behalf and on behalf of Minor, hereby warrant that I have read this Liability Release in its entirety and fully understand its contents. I, in my own behalf and on behalf of Minor, am aware that this Liability Release releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I, in my own behalf and on behalf of Minor, further acknowledge that nothing in this Liability Release constitutes a guarantee that the Event will occur. I, in my own behalf and on behalf of Minor, have signed this document voluntarily and of my own free will.

Signature of Parent or Legal Guardian: X _____ Date: _____

Medical Release: I, in my own behalf and on behalf of Minor, acknowledge and agree that such participation subjects Minor to possibility of physical illness or injury (minimal, serious, catastrophic and/ or death) and that I, in my own behalf and on behalf of Minor, acknowledge that Minor is assuming the risk of such illness or injury by participating in the Event. In the event of such illness or injury, I authorize Varsity Spirit to obtain necessary medical treatment of Minor and hereby, in my own behalf and on behalf of Minor, release and hold harmless Releasees in the exercises of this authority. I further acknowledge and understand that I will be responsible for any and all medical and related bills that may be incurred on behalf of Minor for any illness or injury that Minor may sustain during the Event and while traveling to and from the site for the Event whether or not the Event actually occurs.

Supervision: A Chaperone/Adult (age 21 and over) is required to attend with participants. This Chaperone will be responsible for the participant at all times. I/we acknowledge that Varsity Spirit and/or Releasees are not responsible for supervising Minor.

APPEARANCE AGREEMENT: I/we understand Varsity will arrange for photography during the Event which may include minor and that Varsity will arrange the proposed videotapes, DVD's, podcasts and videocasts that may feature the Event (the "Programs"). I/we hereby grant Varsity, their successors, assignees, licensees, sponsors, and all other commercial exhibitors the exclusive right to photograph and/or video tape minor and further utilize minor's name, event participation, hometown, face, likeness, voice and appearance as part of the Programs, or in any other media now in existence or hereafter developed, in advertising and promoting the Programs and in advertising and promotions relating to Varsity without reservation or limitation. In granting this license, I/we understand that Varsity is under no obligation to exercise any of their rights, licenses and privileges herein granted. I/we waive any right to inspect or approve the Programs, copies thereof and any promotional materials related thereto.

Responsibility Disclosure Notice: Varsity Spirit acts only as an agent in connection with the tour offered herein and its liability is limited. The travel services including air transportation, carriage by land, hotel accommodations, restaurants, and related services are provided by independent third parties not under the control of Varsity Spirit. Varsity Spirit shall not bear any liability to the passenger or any third party for any injury, damage, loss, accident, delay, or irregularity which may be occasioned either by reason of or through the acts or defaults of any company or person engaged in conveying the passengers or in carrying out the arrangements of the tour and/or performance events, venues, etc. as a direct or indirect result of acts of God, dangers incident to fire, breakdown in machinery or equipment, acts of governments or other authorities, civil disturbances, strikes, riots, acts of terrorism, theft, unhealthy conditions, pilferage, epidemics, quarantines, medical or customs regulations, or from any other cause beyond the control of Varsity Spirit. Varsity Spirit shall not be liable for any losses or additional expenses due to delay or changes in schedule or other causes. The right is reserved to decline, to accept, or to retain any tour passenger should such person's health or general deportment impede the operation of the tour to the detriment of other passengers. No refunds for your portions of unused services can be made unless agreed to prior to the scheduled deadlines. Your retention of tickets, reservations, or bookings after issuance shall constitute a consent to the above and agreement on your part to convey the contents herein to your traveling companions. Payment of any deposit or final payment shall be deemed to constitute consent by each passenger to these terms. Baggage is carried at the owner's risk and baggage insurance is strongly recommended. It is also recommended that each participant in this tour have his or her own attorney review this RESPONSIBILITY DISCLOSURE NOTICE before indicating his or her consent by signing this consent form.

I represent that any medication to which Minor is allergic or medications that Minor is currently taking are listed below. I agree that Minor shall bring medications which Minor is currently taking with him / her to the Event and that he / she shall consume the prescribed dosage for such medications.

Medications (if any): _____

Allergic to (if any): _____

I acknowledge that Minor suffers from the following conditions: _____

School Name (of participant) _____

EMERGENCY INFORMATION: (Not traveling with Minor)

Name: _____ Address _____

Telephone () _____ (home) _____ (work) _____

I, in my own behalf and on behalf of Minor, hereby warrant that I have read this Participant Release and Waiver Form in its entirety and fully understand its contents. I, in my own behalf and on behalf of Minor, am aware that this Participant Release and Waiver Form releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I, in my own behalf and on behalf of Minor, further acknowledge that nothing in this Participant Release and Waiver Form constitutes a guarantee that the Event will occur. I, in my own behalf and on behalf of Minor, have signed this document voluntarily and of my own free will.

Signature of Parent or Legal Guardian: X _____ Date: _____

Relationship to Minor: _____

Every minor on the tour package must complete this form and return to Varsity's office with the initial registration.