

MAKE TWO COPIES — Participants will keep one in their nametag pouch and the Staff Chaperone will collect one. All **PARTICIPANTS** must arrive in New York City with **2** copies in order to participate.

Participants name: _____ School/Studio/Gym name: _____

MEDICAL RELEASE I, _____, the natural parent, legal guardian and/or managing conservator of _____, a minor, do hereby acknowledge and state that said minor is presently under my care, custody and control and that I possess the authority to grant the permission and authorization stated herein, and the minor has no conditions, including but not limited to medical conditions, which would prohibit or restrict his/her participation with Spirit of America Productions, LLC, Showtime International, Inc., Marching Auxiliaries, American Dance-Drill Team, ShowMakers of America, Crowd Pleasers, Mardi Gras Nationals, Spirit Celebration, Varsity Spirit Corporation, Hilton New York and Macy's Thanksgiving Day Parade® (hereinafter "Participating Companies"). I give my permission for the minor to travel with Participating Companies, to participate in the Macy's Thanksgiving Day Parade® and to participate in the activities sponsored by Participating Companies.

In the event of an emergency, I authorize any representative of the Participating Companies to provide or arrange medical treatment for my child/participant. I hereby consent and fully authorize any medical attention, treatment, surgery or administration of drugs by qualified and licensed medical personnel for my child which may become necessary. I understand that I will be notified as soon as possible in the event of an emergency. All expenses of such treatment will be assumed by me or my insurance company. I further waive and release the Participating Companies, their officers, directors, shareholders, agents, employees, insurers, servants, representatives, parent companies, subsidiaries, affiliated companies and divisions, successors, assigns, and heirs from any and all claims, causes of action, liabilities and losses whatsoever whether known or unknown, suspected or unsuspected, and damages that he/she, and his/her respective heirs, successors, and assigns may have now or may have in the future, of any nature whatsoever, including without limitation, claims of negligence, arising from, concerning, or relating to any and all injuries, illnesses, losses or damages of any kind which the minor or I may have as a result of, in connection with, relating to, or alleged to arise out of the minor's participation in the Macy's Thanksgiving Day Parade® and any and all events and activities associated with the Parade including travel to and from the events ("hereinafter referred to as "Parade Events"), with the Participating Companies and specifically, but without limitation, from all claims and causes of action of every kind and character.

Signature of Parent/Guardian: _____ Printed Name of parent/guardian/custodian: _____

Home phone: _____ Business phone: _____ Parent's cell phone: _____

Home address: _____ Participants social security number: _____ Participants Birthdate ____/____/____

Family doctor: _____ Doctor's phone: _____

Name of insurance company: _____ Medical insurance policy #: _____

Insurance Company Address: _____ Insurance company phone: _____

List pertinent medical information applicable to allergies or any other medical condition: _____

Allergic to (if any): _____ List any regular medication the child is taking: _____

EMERGENCY CONTACT

Name: _____ Relation to child: _____ Home phone: _____ Cell phone: _____

VISITATION PERMISSION

CHECK ONE: ☐ My child MAY be checked out from the assigned Staff Chaperone by an adult ☐ My child MAY NOT be checked out!

I _____, the legal guardian of, _____, give permission for my child to be met, to meet, to visit/entertain, to leave with any persons listed below. I understand that this person must be 21 years of age or older. I further understand that my child's assigned Staff Chaperone must not only meet this person indicated below (at the Staff Chaperone's convenience), but see my child depart AND be notified of their return (if applicable). I understand that the only time my child may be checked out is during the designated times outlined in the participant book. Note: If you, as your child's parent/guardian or the director/owner of the studio/gym, are attending this event, **you must also be listed** in order to check your child out from the staff chaperone!

NAME:	RELATIONSHIP TO CHILD	PHONE NUMBER AT WHICH THIS PERSON MAY BE REACHED THE DURING EVENT
_____	_____	(_____) _____
_____	_____	(_____) _____
_____	_____	(_____) _____
_____	_____	(_____) _____

LIABILITY RELEASE In consideration of being allowed to participate in the Parade Events and all events related to the Parade Events including travel to and from, the undersigned Participant/Guardian hereby agree and acknowledge that he/she does not have any physical disorder which would jeopardize him/her in his/her participation in the Parade Events; that he/she assumes all risks of any damages or loss to his/her person or property, or that of any other person, that may result from participation in the Parade Events; and that he/she fully and completely RELEASES, ACQUITS, AND FOREVER DISCHARGES Participating Companies and their respective principals, officers, directors, shareholders, agents, insurers, servants, employees, representatives, parents, affiliated companies and divisions, successors, assigns, and heirs, from any and all claims, causes of action, liabilities and losses whatsoever, whether known or unknown, suspected or unsuspected, that he/she may have now or may have in the future, of any nature whatsoever including, without limitation, claims of negligence or injuries, damage, or loss of any nature he/she, or any other person, might suffer as a result of participating therein and specifically, but without limitation from all claims and causes of action of every kind and character in connection with, arising out of, relating to, or alleged to arise out of the Parade Events. The undersigned further states and acknowledges that he/she fully understands and consents that he/she will be solely liable and responsible for any and all cost, damages, and expenses of any kind whatsoever that in any matter relate to participation in the Parade and/or Parade Events, and that he/she will not initiate any claim, lawsuit or litigation whatsoever or assert any such claims or causes of action of any nature against any of the above Participating Companies. Further, the Participating Companies and their respective principals, officers, directors, shareholders, agents, insurers, servants, employees, representatives, parents, affiliated companies and divisions, successors, assigns, and heirs are not responsible for acts of God, breakdown in machinery, acts of governments, or other authorities, acts of war whether declared or not, hostilities, civil disturbances, strikes, pilferage, epidemics, quarantines, custom regulations, delays, including weather delays or cancellations of or change in itinerary or schedule, or for any loss beyond their reasonable control. Nor are any of the above Participating Companies, persons or entities liable or responsible for any additional expenses or liability sustained or incurred by the Participant as a result of any participation in the Parade Events. The Participating Companies further reserve the right to decline, accept or retain any person as a participant as circumstances may demand it. Baggage is carried at the owner's risk and baggage insurance is strongly recommended. Absolutely no refunds will be given after September 15, 2010. Your participation in the Parade Events, retention of tickets, and/or placing reservations via a deposit or bookings shall constitute a consent to the above agreement on your part to convey the contents herein to any of your traveling companions. In the event any of the Parade Events are canceled, which includes the actual Macy's Thanksgiving Day Parade®, after the refund period, Participants and Spectators may still take advantage of the amenities still available in the ground package as any such payment for these amenities will not be refunded.

Signature of Parent/Guardian X _____ Date: _____ Signature of Witness X _____ Date: _____