



Please make as many copies of this entry form as you need. **DO NOT USE THIS FORM FOR ANY SIX FLAGS THEME PARK EVENTS.**

ROYAL VALLEY

NOVEMBER 14TH, 2010

TEAM: _____
(This is how the team will be announced and printed in the schedule)

You have my forms. I attended the event at _____

MAIN CONTACT: _____
(All correspondence will be sent to this contact)

ADDITIONAL CONTACT(S): _____
Above coach(es) listed will be the only coaches allowed to check in team at event. Any requests/changes must come from one of the above listed coaches.

ADDRESS: _____

CITY: _____

STATE: _____ **ZIP:** _____

DAYTIME PHONE: () _____

CELL PHONE: () _____

E-MAIL: _____
(Required for confirmation. All event correspondence will be sent to this email.)

ENTRIES MUST INCLUDE THE FOLLOWING IN ORDER TO BE PROCESSED:

- 1) Completed Championship Entry Form
- 2) Full payment (checks must be made payable to: **JAMZ Championships**)
- 3) Youth League Roster
- 4) Signed Code of Conduct
- 5) Completed Agreement of Compliance Form (first event only)

Be sure to read the 2010-2011 Championship Guide for specifics on how to complete all forms.

MAIL ENTRIES TO:
JAMZ Championships
P.O. Box 4308
Modesto, CA 95352

UPS/ FED EX do not ship to this address.
To expedite use Express or Priority Mail from the US Post Office.

FAX ENTRIES TO: 209-578-1617

PAYMENT:

Total # of Participants	X	Registration Fee	=	Total Amount Due
_____	<input type="checkbox"/>	Early Bird - \$27 Before 10/7		_____
_____	<input type="checkbox"/>	On-Time - \$32 10/8 - 10/25		_____
_____	<input type="checkbox"/>	Late - \$37		_____

(Full payment due at time of registration. One check or credit card with full funds available.)

CHECK CHECK # _____
(No personal checks)

CREDIT CARD: See Credit Card Authorization Form
(Full payment ONLY)

JAMZ LEGAL POLICIES... (THE BORING BUT IMPORTANT DETAILS)

ANY ENTRIES MUST INCLUDE ALL COMPLETED FORMS. Entries are limited. Any faxed team entries that do not follow up with forms within the appropriate time frame will not be processed. Coaches registering late MUST call JAMZ at (800) 920-4272 for approval of late entry (acceptance is not guaranteed due to limited space available). Late registration rates will be applied and registration will only be processed if approved by JAMZ. Notification of registration receipt will be sent via email or mail. For prompt notification, please include your email address on the registration forms. If you do not receive notification within seven days of mailing registration documents, please call JAMZ at (800) 920-4272 or email championships@jamz.com.

CANCELLATION POLICY: If a participant cancels (regardless of the reason) you cannot apply that person's payment to another team. However, if a participant cancels from your registration and you replace that participant with a new participant for your team, you can use the payment of the first participant towards the new.

DIVISIONS	CATEGORY #1	CATEGORY #2 FREE*
Youth Show Cheer	# PARTICIPANTS ON FLOOR	# PARTICIPANTS ON FLOOR
Youth IAA Tyro		
Youth IAA Level 1		
Youth IAA Level 2		
Youth IA Non-Mount		
Youth IA Tyro		
Youth IA Level 1		
Youth IA Level 1 Limited		
Youth IA Level 2		
Youth I Tyro		
Youth I Level 1		
Youth I Level 2		
Youth I Level 3		
Youth II Non-Mount		
Youth II Tyro		
Youth II Level 1		
Youth II Level 2		
Youth II NA Level 2		
Youth II Level 2 Limited		
Youth II Level 3		
Youth III Tyro		
Youth III Level 1		
Youth III Level 2		
Youth III Level 3		
Youth IV Non-Mount		
Youth IV Tyro		
Youth IV Level 1		
Youth IV Level 2		
Youth IV Level 3		
Youth IV NA Level 3		
Youth IV Level 3 Limited		
Youth Performance Cheer		
Youth IAA Non-Mount		
Youth IAA Level 1		
Youth IAA Level 2		
Youth IAA Level 3		
Youth IA Non-Mount		
Youth IA Level 1		
Youth IA Level 1 Limited		
Youth IA Level 2		
Youth IA Level 3		
Youth I Non-Mount		
Youth I Level 1		
Youth I Level 2		
Youth I Level 3		
Youth II Non-Mount		
Youth II Level 1		
Youth II Level 2		
Youth II Level 2 Limited		
Youth II Level 3		
Youth III Non-Mount		
Youth III Level 1		
Youth III Level 2		
Youth III Level 3		
Youth IV Non-Mount		
Youth IV Level 1		
Youth IV Level 2		
Youth IV Level 3		
Youth IV Level 3 Limited		
Youth Pom Performance		
Youth IAA		
Youth IA		
Youth I		
Youth II		
Youth III		
Youth IV		
Youth Funk/Hip-Hop		
Youth IAA		
Youth IA		
Youth I		
Youth II		
Youth III		
Youth IV		
Youth IV NA		
Youth Jazz		
Youth Open		
Youth Character Dance		
Youth Open		
Non-Ranking		
Mascot		
Total # of Participants =		

* **Category #2 Free** - The second category MUST contain at least 70% of the SAME participants as the first category. Additional participants cannot be added to the second category. Teams are NOT allowed to compete in the same CATEGORY twice. For full details see page 6 in the Championship Guide.



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ROYAL VALLEY

NOVEMBER 14TH, 2010

TEAM: _____
(This is how the team will be announced and printed in the schedule)

You have my forms. I attended the event at _____

MAIN CONTACT: _____
(All correspondence will be sent to this contact)

ADDITIONAL CONTACT(S): _____
Above coach(es) listed will be the only coaches allowed to check in team at event. Any requests/changes must come from one of the above listed coaches.

ADDRESS: _____

CITY: _____

STATE: _____ **ZIP:** _____

DAYTIME PHONE: (_____) _____

CELL PHONE: (_____) _____

E-MAIL: _____
(Required for confirmation. All event correspondence will be sent to this email.)

ENTRIES MUST INCLUDE THE FOLLOWING IN ORDER TO BE PROCESSED:

- 1) Completed Championship Entry Form
- 2) Full payment (checks must be made payable to: **JAMZ Championships**)
- 3) All-Star/Studio Organization Roster
- 4) Signed Code of Conduct
- 5) Completed Agreement of Compliance Form (first event only)

Be sure to read the 2010-2011 Championship Guide for specifics on how to complete all forms.

MAIL ENTRIES TO:
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P.O. Box 4308
Modesto, CA 95352

UPS/ FED EX do not ship to this address.

To expedite use Express or Priority Mail from the Post Office.

FAX ENTRIES TO: 209-578-1617

PAYMENT:

Wristbands to be Given	X	Registration Fee	=	Amount Due
_____	<input type="checkbox"/>	Early Bird - \$39 Before 10/7		_____
_____	<input type="checkbox"/>	On-Time - \$44 10/8 - 10/25		_____
_____	<input type="checkbox"/>	Late - \$49		_____
Total # of Cross Competitors	X	Registration Fee	=	Amount Due
_____	<input type="checkbox"/>	Cross Competitor - \$30		_____
		Total Amount Due=		_____

(Full payment due at time of registration. One check or credit card with full funds available.)

CHECK CHECK # _____
(No personal checks)

CREDIT CARD: See Credit Card Authorization Form
(Full payment ONLY)

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CANCELLATION POLICY: If a participant cancels (regardless of the reason) you cannot apply that person's payment to another team. However, if a participant cancels from your registration and you replace that participant with a new participant for your team, you can use the payment of the first participant towards the new.

DIVISIONS:	CATEGORY #1			CATEGORY #2**	
	# ON FLOOR	# OF CROSS COMPETITORS	WRISTBANDS TO BE GIVEN*	# ON FLOOR	
All-Star Show Cheer					
Tiny Level 1	-	=			
Mini Level 1	-	=			
Mini Level 2	-	=			
Mini Level 3	-	=			
Youth Level 1	-	=			
Youth Level 2	-	=			
Youth Level 3	-	=			
Youth Level 4	-	=			
Youth Level 5	-	=			
Junior Level 1	-	=			
Junior Level 2	-	=			
Junior Level 3	-	=			
Junior Level 4	-	=			
Junior Level 5	-	=			
Junior Co-Ed Level 3	-	=			
Junior Co-Ed Level 4	-	=			
Junior Co-Ed Level 5	-	=			
Senior Open Level 5	-	=			
Senior Level 1	-	=			
Senior Level 2	-	=			
Senior Level 3	-	=			
Senior Level 4	-	=			
Senior Level 4.2	-	=			
Senior Level 5	-	=			
Senior Co-Ed Level 3	-	=			
Senior Co-Ed Level 4	-	=			
Senior Limited Co-Ed Lvl 5	-	=			
Senior Semi-Lim Co-Ed Lvl 5	-	=			
Senior Unlimited Co-Ed Lvl 5	-	=			
Int'l Open Level 5	-	=			
Int'l Open Co-Ed Level 5	-	=			
Open (Int'l) All-Girl Level 6	-	=			
Open (Int'l) Co-Ed Level 6	-	=			
All-Star/Studio Pom Performance					
Tiny [] Novice	-	=			
Mini [] Novice	-	=			
Youth [] Novice	-	=			
Junior [] Novice	-	=			
Senior [] Novice	-	=			
Open	-	=			
All-Star/Studio Funk/Hip-Hop					
Tiny	-	=			
Mini	-	=			
Youth	-	=			
Junior	-	=			
Senior	-	=			
Open	-	=			
All-Star/Studio Jazz					
Tiny [] Novice	-	=			
Mini [] Novice	-	=			
Youth [] Novice	-	=			
Junior [] Novice	-	=			
Senior [] Novice	-	=			
Open	-	=			
All-Star/Studio Lyrical					
Youth	-	=			
Junior	-	=			
Senior	-	=			
Open	-	=			
All-Star/Studio Character Dance					
Youth	-	=			
Junior	-	=			
Senior	-	=			
Open	-	=			
Non-Ranking Categories					
Mascot					
Special Needs (free)					

TOTAL# OF CROSS COMPETITORS	WRISTBANDS TO BE GIVEN*

* **Wristbands to be Given** - This is the amount of wristbands that you will be receiving for your team/organization. Each participant must be included in this column once. If they are not included you will be short wristbands. (Wristbands allow team members access to the venue and the warm-up areas) This number should match the total amount of athletes on your team/organization.

** **Category #2 Free** - The second category MUST contain at least 70% of the SAME participants as the first category. Additional participants cannot be added to the second category. For full details see page 6 in the Championship Guide.



GYM/STUDIO NAME: _____

MAIN CONTACT: _____

SIGNATURE: _____

DATE: / /

PARTICIPANT NAME		DOB	M / F	TEAM 1	TEAM 2	TEAM 3
To the right, please list all Divisions and Levels for your organization (i.e. Jr 4, Sr 4, Sr from etc.)						
1	John Smith	1/5/97	M	X		
2	Megan Matthews	6/20/94	F		X	X
3	Susan Smith	12/5/93	F	X		X
Total Participants:				2	1	2

PARTICIPANT NAME	DOB	M / F	TEAM 1	TEAM 2	TEAM 3	TEAM 4	TEAM 5	TEAM 6	TEAM 7	TEAM 8
To the right, please list all Divisions and Levels for your organization (i.e. Mini 1, Jr 4, Sr 4 etc.)										
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
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19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										

TOTAL PARTICIPANTS (i.e. Team 1: 12, Team 2: 19 etc.):



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<input type="checkbox"/> Early Bird - \$27 <small>Before 10/7</small> <input type="checkbox"/> On-Time - \$32 <small>10/8 - 10/25</small> <input type="checkbox"/> Late - \$37	_____ _____ _____
Total # of Cross Competitors X Registration Fee = Amount Due	
<input type="checkbox"/> Cross Competitor - \$30	_____ _____
Total Amount Due=	

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DIVISIONS:	CATEGORY #1*			CATEGORY #2**	
	# ON FLOOR	# OF CROSS COMPETITORS	WRISTBANDS TO BE GIVEN*	# ON FLOOR	
School Show Cheer					
Elementary Level 1	-	=			
Elementary Level 2	-	=			
Jr. High/Middle School Level 1	-	=			
Jr. High/Middle School Level 2	-	=			
Freshman Level 1	-	=			
Freshman Level 2	-	=			
Junior Varsity Level 1	-	=			
Junior Varsity Level 2	-	=			
Junior Varsity Level 2.5	-	=			
Junior Varsity Level 3	-	=			
Varsity Level 1	-	=			
Varsity Level 2	-	=			
Varsity Level 2.5	-	=			
Varsity Level 3	-	=			
Varsity Co-Ed Level 1	-	=			
Varsity Co-Ed Level 2	-	=			
Varsity Co-Ed Level 2.5	-	=			
Varsity Co-Ed Level 3	-	=			
School Sideline Performance Cheer					
Jr. High/Middle School	-	=			
High School	-	=			
High School Co-Ed	-	=			
School Pom Performance					
Elementary	-	=			
Jr. High/Middle School	-	=			
Freshman	-	=			
Junior Varsity	-	=			
Varsity	-	=			
School Funk/Hip-Hop					
Jr. High/Middle School	-	=			
Junior Varsity	-	=			
Varsity	-	=			
School Jazz					
Jr. High/Middle School	-	=			
Junior Varsity	-	=			
Varsity	-	=			
School Lyrical					
Junior Varsity	-	=			
Varsity	-	=			
			TOTAL# OF CROSS COMPETITORS	WRISTBANDS TO BE GIVEN*	
			_____	_____	

* **Wristbands to be Given** - This is the amount of wristbands that you will be receiving for your team/organization. Each participant must be included in this column once. If they are not included you will be short wristbands. (Wristbands allow team members access to the venue and the warm-up areas) This number should match the total amount of athletes on your team/organization.

** **Category #2 Free** - The second category MUST contain at least 70% of the SAME participants as the first category. Additional participants cannot be added to the second category. For full details see page 6 in the Championship Guide.



Please submit the info requested below for each team attending a JAMZ Championship. Teams must use this JAMZ form. Only **one form** per team **per season** is needed. If additional members are added after the form is submitted, resubmit an amended Team Roster to JAMZ. Team Roster Forms must be **signed** (to be valid) and submitted with your team's first Championship Team Entry Form.

- SIGNATURES ARE REQUIRED BELOW -

SCHOOL NAME:		DIVISION:	
PARTICIPANT NAME		GRADE	M / F
Ex.	Jennifer Smith	8	F
1			
2			
3			
4			
5			
6			
7			
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10			
11			
12			
13			
14			
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32			
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34			
35			
36			

ADVISOR/COACH:	/ /	SIGN AND DATE
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SCHOOL OFFICIAL:	TITLE:	/ /	SIGN AND DATE
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“You get the best out of others when you give the best of yourself.”

JAMZ MISSION STATEMENT... *Because we know that EVERY event is someone's FIRST event!*

JAMZ Cheer & Dance strives to provide a safe and positive environment for kids to enhance self-esteem, improve skill levels and educate teams. By hiring talented and knowledgeable staff and conducting all events with the highest level of integrity and professionalism, JAMZ will pursue quantitative growth without sacrificing the quality of the company's products or services.

WHY DO I HAVE TO FILL THIS OUT?... *We know it's more paperwork, but it's for a good cause.*

Knowing the time and effort coaches, athletes, and parents put forth during each season, JAMZ works hard to ensure our events remain professional, fair, and above all, fun! As role models to the athletes, JAMZ will conduct events in an ethical manner and we ask those attending JAMZ events to do the same.

THE LEGAL STUFF... *Please read and initial each section.*

Teams will be required to follow this **Code of Conduct** at all JAMZ Cheer & Dance Championships:

- A. I have read, understand and agree to abide by all requirements set forth in the 2010-2011 Championship Guide.
- B. I will follow all category, division, level, general routine and safety guidelines. I understand that a violation of these guidelines will result in a penalty, point deduction, forfeiture of scores or disqualification.
- C. I understand if a violation is reported regarding the age/grade level of one of my participants, I will be required to supply proof of age/grade level to JAMZ officials at that time (note: home-schooled students, must automatically submit proof of age/grade level). I understand that failure to provide this proof of age/grade level will result in the protest standing.
- D. I will accept all judges' decisions as final and will support the event and my program respectfully. If I feel I have a valid protest, I may register a complaint with the JAMZ Cheer and Dance Event Director for review. Parents or participants may not file complaints.
- E. I understand that a parent approaching any JAMZ or affiliate staff with a protest will forfeit the coach's right to protest.
- F. As a role model, I will display good sportsmanship and require the same of my team members, parents and spectators.
- G. I have registered my team in the correct category, division and level to the best of my knowledge and understand the process by which to submit changes outlined in the Championship Guide and Change Request Form.
- H. As the registering coach, any and all changes must come from myself and must be submitted in writing.

JAMZ has the right to remove any coach, participant or spectator for inappropriate behavior, or assess a penalty on a team based on the severity of the infractions above. Actions will be taken at the discretion of JAMZ officials.

JAMZ OFFICE: (800) 920-4272 • FAX: (209) 578-1617 • EMAIL: championships@jamz.com

As the coach/director/representative of _____

Forms may be submitted by team or organization. *Please circle one:*
team / organization / league / gym / studio / school

I have read statements A-H above and agree to adhere to the all of the above guidelines.

Title within Organization: _____

Print Name

Signature of Representative

Date



ORGANIZATION/TEAM NAME: _____

DATE SUBMITTED: _____

MAIN CONTACT: _____

SIGNATURE: _____

A. As the parent or legal guardian of the above-listed child, I freely acknowledge that I have voluntarily registered my child to participate in cheerleading activities of JAMZ AMERICAN SPIRIT CONNECTION, INC., a California corporation (hereinafter "JAMZ"), which include dance, gymnastics, stunting, jumping and tumbling components. I acknowledge that my child's participation in the JAMZ cheerleading activities entails both known and unanticipated risks that could result in serious and permanent physical and emotional injuries to my child, my child's death, damage to property, and injury to others. I understand that such risks are inherent in the activities and that even with precautions and safety measures they simply cannot be eliminated without jeopardizing the essential qualities of the activities. I also understand and acknowledge that injuries received by my child may be compounded or increased by negligent rescue operations or the assistance of JAMZ Representatives (defined below). Understanding such dangers, I hereby knowingly and voluntarily enroll my child in the JAMZ cheerleading event. I give my permission for my child to engage in the activities described herein, and I assume the risk of the activities involving my child. I understand that I, my child would not have permission to participate in the JAMZ cheerleading activities without agreeing to these terms and conditions.

B. I represent that my child is in good health, that I adequately informed JAMZ Representatives running the activities of any special instructions regarding my child's health or physical condition. I certify that I have adequate insurance to cover any injury or damage that my child may suffer while participating in the JAMZ cheerleading activities. I agree to bear the costs of any injury or damages my child may suffer while participating in the JAMZ cheerleading activities. I hereby authorize JAMZ Representatives to call for medical care for my child or to transport my child to a medical facility or hospital if in the opinion of such personnel, my child needs medical attention. I hereby authorize and grant permission to emergency medical personnel to administer first aid or immediate medical treatment to my child should my child become injured or ill.

C. On behalf of my child and myself, I hereby knowingly and voluntarily release and forever discharge JAMZ or its employees, agents, coaches, instructors, assistants, officers, directors, owners, shareholders, subcontractors, and any other representatives or affiliates and their respective heirs, successors, and assigns (collectively with JAMZ "JAMZ Representatives") from any and all liability arising out of or in connection with the above-described activities involving my child. "Liability" means any and all claims, demands, losses, causes of action, lawsuits or judgments of any and every kind that occurs during or incidental to the above-described activities, that results from any cause whether caused by the negligence of the JAMZ Representatives or otherwise.

D. I hereby agree to and shall indemnify, defend, save and hold harmless JAMZ Representatives from and against any and all loss, liability, damage or cost JAMZ Representatives may incur, including attorneys' fees and litigation costs, arising out of or related to the above-described activities, whether caused by the negligence of JAMZ Representatives or otherwise.

E. I hereby agree that the assumption of risk, the release and waiver of liability, and the indemnity agreements contained herein extend to all acts of negligence by JAMZ Representatives including negligent rescue operations, is intended to be as broad and inclusive as is permitted by the laws of California and any other state whose laws apply to the activities described herein, and that if any portion of this form is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

F. I give JAMZ Representatives the right to photograph or video tape my child, or likeness of my child, for any reproductions associated or in any way connected with any televised or filmed event undertaken by JAMZ. Specifically, I hereby forever and irrevocably grant to JAMZ a license and permission to use any such photographic or video reproduction of my child in any form of advertisement for JAMZ or its promotional purposes.

G. By signing this form I represent that I have read this form thoroughly and understand it completely including the substantial legal rights I am giving up for my child and myself by signing it. I have had the opportunity to have my own attorney review this form and my attorney has done so or I have knowingly and voluntarily chosen not to have my attorney review this form. I have signed this form freely and voluntarily without inducement of any kind or guarantee being made by JAMZ Representatives or anyone else. I intend by my signature for this form to be a complete and unconditional release of any and all liability to the greatest extent allowed by law. I understand and agree that this form cannot be amended or modified by any oral statements or other writings from any JAMZ Representatives and that it is binding on my child, myself, and our heirs, successors, distributees, guardians, legal representatives, and assigns.

FOR THOSE ATTENDING SIX FLAGS EVENTS:

H. I must have a JAMZ ticket with wristband or Season Pass with wristband for early admittance to these events. Wristbands MUST be worn around the wrist at ALL TIMES. Those without wristbands will not be allowed to enter the theater/stadiums; wristbands can be purchased at the event.

I. I also agree to hold harmless Six Flags Magic Mountain, Six Flags Discovery Kingdom, Six Flags Theme Parks Inc. and their respective officers, directors, employees, agents, contractors, subsidiaries, affiliates and parent companies for any injury incurred as a result of my daughter's/s sons' participation in the contest, even if it is shown they are negligent.

EX.	PARTICIPANT NAME	DOB	M / F	INSURANCE COMPANY NAME	PARENT/LEGAL GUARDIAN SIGNATURE	DATE SIGNED	CELL # / EMERGENCY CONTACT
1	Stephanie Smith	01/01/95	F	Blue Cross	MIKE Smith	5/15/10	(555) 555-5555 / Mike Smith
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

If you have more than 20 participants in your organization/team, please duplicate this form as necessary.