## Hawaii All-Stars Liability Release and Waiver Form

For good and valuable consideration, the receipt a	nd sufficiency of which are hereby
acknowledged, I	, as parent or legal guardian of
, a minor (her	einafter "Minor"), hereby grant the
permission necessary to allow Minor to practice and All-Stars Gym located at 106 S Kane Street, Unit 10 on behalf of Minor, further agree to release and to Molina, and the respective officers, directors, represemployees (hereinafter collectively "Releasees") from the Releasees or otherwise for any context expense (including, without limitations, attorney's with Hawaii All-Stars, including but not limited to provide the fundraisers, socials, and other cheerleading activitical including any claim arising out of or connected with catastrophic and/or death) that Minor may incur of traveling to and from the site for the Activities who further expressly agree to indemnify and hold harm successors, assigns, executors and administrators are or actions that may subsequently be brought by Monor in a further agree to reimburse and to make good to Releasees that may subsequently be brought by Minor or by damages of any character resulting to Minor in any agree to reimburse and to make good to Releasees	nd participate in other activities at the Hawaii 13, Kahului, HI 96732. I, in my own behalf and hold harmless Hawaii All-Stars and Kealii esentatives, members, agents, and om any and all liability whether caused by laim, judgment, loss, liability, cost and fees and costs) arising out of or connected practices, performances, competitions, lies (hereinafter collectively "Activities"), he any illness or injury (minimal, serious, or sustain during the Activities and while either or not the Activity actually occurs. I mless Releasees and Releasees' heirs, against loss from any further claims, demands inor or by any other persons on the account any way from the foregoing Activities. I eleasees and Releasees' heirs, successors, from any further claims, demands or actions any other persons on the account of y way from the foregoing Activities. I further
as a result of any such action, claim or demand.	
I, in my own behalf and on behalf of Minor, hereby Release in its entirety and fully understand its cont Minor, am aware that this Liability Release release acknowledgment of my voluntary and knowing ass my own behalf and on behalf of Minor, further ack Release constitutes a guarantee that the Activities of Minor, have signed this document voluntarily and	tents. I, in my own behalf and on behalf of s Releasees from liability and contains an sumption of the risk of injury or illness. I, in anowledges that nothing in this Liability will occur. I, in my own behalf and on behalf
Signature of Parent or Legal Guardian	——————————————————————————————————————

Appearance Agreement: I understand that Hawaii All-Stars from time to time produces promotional material relating to its programs. I understand that as participant and/or spectator at Hawaii All-Star Activities (hereinafter collectively "Activities") that Minor may be included in videotapes, DVDs, pod casts and video casts, or photographs taken during the Activities. Therefore, without reservation or limitations, I, in my own behalf and on behalf of Minor, hereby assign, transfer and grant to Hawaii All-Stars, its successors, assignees, licensees, sponsors, any television networks, print media, internet sites, and all other commercial exhibitors the right to photograph and/or videotape Minor and to utilize such videotapes and photographs and Minor's name, face likeness, voice and appearance as part of the Activities or in any other media now in existence or hereafter developed, in advertising and promoting the Activities, in advertising and promoting similar future Activities or in advertising and promotions relating to Hawaii All-Stars without reservation and limitations. I further understand that neither Hawaii All-Stars nor any third party is under any obligation to exercise any of the foregoing rights, licenses and privileges herein granted. I waive any right to inspect or approve the programs, copies thereof and any promotional materials related thereto. Signature of Parent or Legal Guardian Date Medical Release: I, in my own behalf and on behalf of Minor, acknowledge and agree that participation in Hawaii All-Star Activities (hereinafter collectively "Activities") 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 Activities. In the event of such illness or injury, I authorize Hawaii All-Stars to obtain necessary medical treatment for Minor and hereby, in my own behalf and on behalf of Minor, release and hold harmless Releasees in the exercise of this authority. I further acknowledge and understand that I will be responsible for any and all medical and related bills and costs that may be incurred on behalf of Minor for any illness or injury that Minor may sustain during the Activities and while traveling to and from the Activities whether or not the Activities actually occur.

Date

Signature of Parent or Legal Guardian