



NOTRE DAME ROWING CLUB
REGISTRATION FORM
NOTRE DAME ROWING ACADEMY
FALL 2018



PROGRAM DESCRIPTION AND COST

ND ROWING ACADEMY FALL LEARN TO ROW PROGRAM:
September 15th to October 21st *No Rowing on September 22nd*
Cost: \$175.00 (\$154.87 + \$20.13 HST)

- For students from grade 9-12 that have not previously participated in high school or club rowing. They may have completed a Learn to Row session.
- 2 days a week of land and water training, Saturday and Sunday 10:30-12:30. No rowing on Sept. 22.
- This session focuses on building rowing skills needed for competition

REGISTRATION POLICIES:

All fees are due up front. No one will be allowed on the water without completed forms and payments handed in to our Registrar. Forms of payment accepted are cash, credit card, cheques, and e-transfers.

ATHLETE INFORMATION

Name:		Male <input type="checkbox"/>	Female <input type="checkbox"/>
Date of birth (m/d/yr):	Home Phone:	Cell Phone:	
Address:			
City:	Province:	Postal Code:	
E-mail:			

EMERGENCY CONTACT

Name of a relative:		
Address:		Phone:
City:	Province:	Postal Code:
Relationship:		

MEDICAL INFORMATION

Health Condition or Allergy:

PARENT INFORMATION (IF UNDER 18)

Name of Parent:		
Address (if different from above):		
City:	Province:	Postal Code:
Email (*REQUIRED*):		Phone:



**NOTRE DAME ROWING CLUB
REGISTRATION FORM
NOTRE DAME ROWING ACADEMY
FALL 2018**



MEMBERSHIP REQUIREMENTS

1. I have read the Notre Dame Rowing Club Code of Conduct (posted on www.ndrowing.ca) and agree to abide by this code at all times.
2. I understand that personal information may be released by the Notre Dame Rowing Club to its members and coaches, other associations, and/or clubs as it pertains to my rowing and/or regatta requirements.

Athlete's Name:

Signature:

Date:

WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in the Notre Dame Rowing Club's program and related events and competitions, I acknowledge and agree that:

1. By virtue of my participation, I risk bodily injury, including paralysis, dismemberment, drowning and death. I knowingly and freely assume all such risk.
2. I release, hold harmless and promise not to sue the Notre Dame Rowing Club, its officers, coaches, agents, employees, or sponsor, as well as the organizer and sponsor of any competition with respect to any and all such injury, paralysis, dismemberment, drowning, death or loss, except that injury or loss which results from negligence or willful or wanton misconduct as may be proven in a court of law having jurisdiction of one of those individuals or organizations.
4. I hereby allow the Notre Dame Rowing Club to use photos of myself/my crew on their website and print media for the sole purpose of promoting the club and the sport of rowing.
5. My signature below indicates my understanding of all requirements for me to train and row in the programs offered by the Notre Dame Rowing Club.

Athlete's Name:

Signature:

Date:

PARENTAL CONSENT (REQUIRED FOR ALL ATHLETES UNDER THE AGE OF 18)

Name of Parent or Guardian:

Signature:

Date:

PAYMENT AND REFUNDS

Please make cheques payable to Notre Dame Rowing Club. Athletes may not participate in programming until payment is received or payment arrangements are made and/or any outstanding debt is paid.

Refunds: Full refunds will only be granted before the first day of the start date of the program. Refunds will be granted only within the first two weeks of the start of a program. 50% of the program fee will be returned, less administration fee of \$25 and less the Rowontario and RCA affiliation fees.

After two weeks, no refund will be granted. Requests for refunds must be in writing and are to be sent to admin@ndrowing.ca.

OFFICE USE ONLY	Payment Received	Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>	Visa/MC <input type="checkbox"/>	Received By:
	Program	Comp <input type="checkbox"/>	Adult <input type="checkbox"/>	LTR <input type="checkbox"/>	

Credit Card Information

Account Type: Visa MasterCard Other

Cardholder Name _____

Account Number _____

Expiration Date _____ Signature _____

CVV2 (3 digit number on back of Visa/MC _____)