

# LEARN TO ROW REGISTRATION FORM

## PROGRAM DESCRIPTION AND COST

### REGISTRATION POLICIES:

All fees are due up front. No one will be allowed on the water without completed forms and payments emailed in to our Registrar.

Cost for program is \$87.72+(HST)12.08=\$100.00

**Program Name Fall Learn to Row Saturday and Sunday**

**Choose Time 9am-11am \_\_\_\_\_ OR 11am-1pm\_\_\_\_\_**

## ATHLETE INFORMATION

Name: \_\_\_\_\_ Male  Female

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: \_\_\_\_\_

## MEMBERSHIP REQUIREMENTS

1. I have read the Code of Conduct and Covid policy (posted on [www.ndrowing.ca](http://www.ndrowing.ca)) And agree to abide by this code at all times.

2. I understand that personal information may be released by the 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

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In consideration of being allowed to participate in the 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 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 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 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:

### DISCLAIMER

The Rowing Club, including its Board of Directors, coaches, staff and volunteers, does not endorse or recommend any particular products, treatments, services or diagnosis, whether specifically or generally given. Professional medical advice should be sought in relation to all health and treatment decisions.

### PAYMENT AND REFUNDS

**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 Row Ontario 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.com](mailto:admin@ndrowing.com)

<b>Payments</b>	Etransfer	Credit Card	
	<b>Admin@ndrowing.com</b>	<b>Card number</b> _____ <b>Expiry Date</b> _____ <b>CVV</b> _____	