

**Columbia Rowing Club
Youth Rowing
2011 Fall Registration Form**

Today's Date: _____
Name of Participant: _____ Gender: _____ DOB: _____
Name of Parent or Guardian: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: _____ Cell Phone: _____ Work Phone: _____
Participant Email: _____
Parent/Guardian Email: _____
Emergency Contact Name: _____ Relationship: _____
Emergency Contact Phone: _____
Any Medical Conditions? _____
School: _____ Grade: _____

Parent/Guardian Involvement (Please circle a position you will help with)

Youth Steering Committee	Regatta Travel
Assistant Coach	Chaperone for Travel
Safety/Coach Launch Driver	Boat and Facility Repair/Maintenance
Other	

2011 Fall Fees:

_____ CRC Full-year Member (includes Introductory clinic)	\$ 120
_____ Youth (includes half-year CRC membership and introductory clinic)	\$ 200
_____ Introductory Clinic (full credit applied to season fee)	\$ 25

*** Fees are not refundable.**

It is the policy of the Columbia Rowing Club that no interested person be excluded from rowing because of financial hardship. If you are concerned that you cannot afford the Youth Rowing fees, please contact the Head Coach.

Mail form and payment to: George Park
Head Coach
Columbia Rowing Club Youth Rowing
720 Vintage Lane
Columbia, South Carolina 29210

Make checks payable to Columbia Rowing Club please note Youth Rowing in memo line

Release of Liability

IN CONSIDERATION of being given the opportunity to participate in any USRowing activity, including scheduled, supervised club activities of the Columbia Rowing Club, and registered regattas, during the policy term 01/01/11 – 12/31/11, I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree and represent that I understand the nature of Rowing Activities, both on water and land based, and that I am qualified, in good health, and in proper physical condition to participate in such Activity.

2. FULLY UNDERSTAND that: (a.) ROWING ACTIVITIES INVOLVE RISKS AND DANGERS of serious bodily injury, including permanent disability, paralysis and death ("Risks"); (b.) these Risks and dangers may be caused by my own actions, or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or the negligence of the Releasee named below; (c.) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in the Activity.

3. AGREE AND WARRANT that I will examine and inspect each Activity in which I take part as a member of USRowing and that, if I observe any condition which I consider to be unacceptably hazardous or dangerous, I will notify the proper authority in charge of the Activity and will refuse to take part in the Activity until the condition has been corrected to my satisfaction.

4. HEREBY RELEASE, discharge, and covenant not to sue USRowing, the Club, the Regatta, Richland County, South Carolina, their administrators, directors, agents, officers, volunteers and employees, other participating regatta organizers, any sponsors, advertisers, and owners and lessors of premises on which the Activity takes place, (each considered one of the Releasees herein) from all liability, claims, demands, losses or damages on my account caused or alleged to be caused in whole or in part by the negligence of the Releasee or otherwise, including negligent rescue operations; and I further agree that if, despite this release and waiver of liability, assumption of risk, and indemnity agreement, I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as a result of such claim, to the fullest extent permitted by law.

I have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it and have signed it freely and without any

inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

Printed Name of Participant:

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Date:** _____

Participant's Signature:

PARENTAL CONSENT

(if participant is under the age of 18).

AND I, the minor's parent and/or legal guardian, understand the nature of rowing activities and the minor's experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby release, discharge, covenant not to sue, and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses, or damages on the minor's account caused or alleged to be caused in whole or part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the above Releasee, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any may incur as the result of any such claim, to the fullest extent permitted by law.

Printed Name of Participant:

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Date:** _____

Parent/Guardian Signature (only if participant is under the age of 18):

Columbia Rowing Club Youth Rowing Contract Spring 2011

Rower's Name: _____

PART ONE - Confirmation of Intent to Participate

I / We, the Parent(s)/Guardian(s) of the above named Rower, have discussed the following list of items and requirements pertaining to participation in the Columbia Rowing Club Youth Rowing.

We are fully aware of the following :

1. The primary purposes Columbia Rowing Club Youth Rowing is to give youth rowers the opportunity to participate in recreational rowing, and, when appropriate, to compete at the highest level possible. Since crew is a team sport, all athletes are expected and therefore required to participate with adequate frequency and dedication to assure a safe and successful program as delineated in the participation requirements, and as determined by the coaching staff. Our motto: "Ready to Row".
2. By committing to participation in this program, we assume full financial responsibility as outlined in the cost information given us for each season. (SEE NOTE BELOW)
3. We have discussed thoroughly, and are therefore aware, of the time commitment that is required for participation in this program, by both the athletes and the athletes' parents. We understand that rowing is an inherently demanding sport in terms of time, energy and money. We have made preparation in advance to allow for these commitments.

PART TWO - Contract Acknowledgment

By my / our signature(s) below, in addition to confirming my / our intent to participate as outlined above,

1. I / We acknowledge that I / we have read the Youth Rowing Program Handbook;
2. I / We acknowledge that I / we have read and understand the sections of the handbook regarding
 - a. Youth Rowing Program Rules
 - b. Boat and Equipment Policy
 - c. Fees Policy
3. As a rower, or as a rower's parent, and as I / we fully understand the responsibilities that I / we have to the program. Further, by my / our signature(s) below, I / we agree to abide by these guidelines, rules and policies, and will to the best of my / our ability assist others in their adherence to these guidelines, rules and policies.
4. I/We authorize the Columbia Rowing Club to have, use, publish and reproduce photographs, slides, moving pictures or videotape of my/our child for its records or public relations efforts.

Rower's Name: _____

Rower's Signature _____ Date: _____

Parent's/Guardian's Name: _____

Parent's/Guardian's Signature: _____ Date: _____

Sign and Return to:

George B. Park
Head Coach
Columbia Rowing Club
720 Vintage Lane
Columbia, SC 29210

NOTE: It is the policy of Columbia Rowing Club that no individual will be denied the opportunity to row due to financial hardship. Please contact the Head Coach if you are experiencing financial hardship that will not allow you to participate. Any conversations or financial arrangements will be held strictly confidential.

EMERGENCY MEDICAL INFORMATION AND RELEASE FORM
Spring 2011

Rower's Name : _____

Address : _____

Birthdate : _____ School : _____

Father : _____ Mother : _____

Home Phone : _____ Home Phone : _____

Work Phone : _____ Work Phone : _____

IN CASE OF EMERGENCY NOTIFY:

_____ Phone: _____

Family Doctor : _____ Phone _____

Name and Dosage of any medications:

Drug Allergies : _____

Any other medical information or illness:

HEALTH INSURANCE INFORMATION

Insurance Company : _____ Group Number _____

Name of Insured : _____ Policy Holder ID Number: _____

MEDICAL RELEASE

The undersigned parent/guardian of a minor, does hereby consent to any emergency x-ray, anesthetic medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or specific supervision of any physician and surgeon licensed under the provision of the Medical Practice Act. It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care begin required but is given to provide authority and power on the part of our aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his best judgment may deem advisable; and neither said agent or any organization involved assumes any financial responsibility for exercising this action.

My child is in good health, and I know of no reason why he/she would be incapable of participating in any and all ordinary rowing activities. My child knows how to swim. I understand that I am responsible for informing the coaches of any health condition which may limit the named rower's participation in this sport. If a change in this condition occurs, I will immediately inform the coaches in writing.

Parent's/Guardian's Name: _____

Parent's/Guardian's Signature: _____ Date: _____

**Swimming Certification
Columbia Rowing Club**

This is to certify that _____, born ____/____/____
Name Month / Day / Year

Has been tested for safety on the water, and found to be an able to:

swim 150 meters continuously,

tread water for 10:00 minutes and don a lifejacket while treading water.

Signed: _____
Name of lifeguard, instructor, or coach

Title

Date