

Alexandria Crew Boosters
Summer Crew 2011
At the Dee Campbell Rowing Center

Youth Registration Form

1. Personal Information

Name _____
Address _____
City, State, Zip _____
Date of Birth _____
School _____ Grade - fall of 2011 _____
Telephone (home) _____ (cell) _____
Student e-mail _____
Parent e-mail _____
Experience (number of competitive rowing seasons completed) _____

2. Program (select one)

_____ **Youth Novice Sweep (Limit 50 rowers) Learn to row!**
time/skd. 7:15 am – 9:00 am -- Weekdays -- Monday thru Friday
eligibility rising 8th to 12th grader – no experience needed
fee \$175
description: Novice Sweep is a learn-to-row program for students in the 8th through 12th grades. Rowers are grouped by age and ability and learn the basics of rowing in 8-person shells. Sweep means one oar per rower.

_____ **Youth Intermediate Sweep (Limit 27 rowers) Improve your skill and technique!**
time/skd. 7:00 am – 8:45 am -- Weekdays -- Monday thru Friday
eligibility rising 9th grader – one competitive season of rowing
fee \$175
description: Intermediate Sweep focuses on building rowing skills and technique as well as strength and endurance.

_____ **Youth Sculling**
time/skd. 6:45 am – 7:45 am -- Weekdays -- Monday thru Friday
eligibility two competitive spring seasons of rowing
fee \$200
description: Youth Sculling is primarily for high school students with experience sculling or experience in a varsity-level 8 or 4. Scullers will row in quads, doubles and singles. In sculling, each rower uses two oars.

3. Physical Fitness, Youth Program (Note: Do not bring VHSL forms to registration)

_____ My current VHSL physical is on file at my high school **or**

_____ As the parent of the above named student, I certify that he or she is in good physical health and that strenuous exercise will in no way endanger my son's or daughter's health. (Please discuss any medical conditions with the coach)

4. Swim Test

_____ My swim test is on file with my high school **or**

_____ I will take the swim test and submit it next week
(test date will be announced at the registration.)

5. Certification

I certify the accuracy of the information provided above and I have read and agree to the terms of the USRA waiver attached to this form.

Parent or Guardian Name (please print) _____

Parent/Guardian Signature _____ Date ____ / ____ / ____

IN CONSIDERATION of being given the opportunity to participate in Alexandria Crew Boosters Summer or Fall Rowing Program ("Club") activities ("Activity") until the end of this calendar year, 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 Releasees names 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 the Club 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, their administrators, directors, agents, officers, volunteers and employees, other participating regatta organizers, any sponsors, advertisers, and if applicable, owners and lessors of premises, on which the Activity takes place, (each considered on of the Releasees herein) from all liability, claims, demands, losses or damages on my account caused or allege to be caused in whole or in part by the negligence of the Releasees 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's expenses, attorney fees, loss, liability, damage, or cost which any may incur as a result of such claim.

I have read this agreement, fully understand its terms, understand that 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 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: _____ Date: _____

Address: _____ Phone: _____

Signature _____
(only if age 18 or over)

PARENTAL CONSENT

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 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 Releasees, 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.

Printed Name of Parent/Guardian: _____ Date: _____

Address: _____ Phone: _____

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