



2011 MEMBERSHIP APPLICATION and WAIVER

NAME _____ HEALTH CARD # _____
ADDRESS _____
CITY/TOWN _____ POSTAL CODE _____
PHONE _____ DATE OF BIRTH _____
E-MAIL _____ DD/MM/YYYY
Parent's email - High School only - _____

The undersigned understands and acknowledges that rowing/sculling involves risks and dangers including, but not limited to hypothermia, drowning, strains, sprains and injuries from contact with other boats, both motorized and not, as well as dangers associated with road travel to and from club activities. In consideration of being permitted to participate in Club activities I hereby release the Island Lake Rowing Club and all of its directors, officers and other members and its agents and contractors including coaches, and Credit Valley Conservation Authority from all claims relating to any damages, injuries or losses sustained by me through Club activities, notwithstanding any such damage, injury or loss may have been caused or contributed to by the negligence of the club or any one or more of its directors, officers, members, agents or contractors.

I further acknowledge that I am solely responsible for determining and knowing my physical fitness and health for participation in any rowing/sculling activities and complying with any health caution or advice that may limit or otherwise affect my participation.

In order to improve my awareness of potential risks to my health through the sport of rowing, I agree to review the Par Q questionnaire found on the website: www.islandlakerowing.com
(The ParQ document is for your private use and should **NOT** be returned to ILRC)

I have read and agree to abide by the ILRC Constitution and By law, Safety Rowing Code and Management of Emergencies document and other club rules. I can swim 50 meters, tread water for 10 minutes and have watched the safety video.

SIGNATURE _____ **DATE** _____

Please tell us about your prior rowing experience

In what areas would you like to contribute to the Club

_____ (safety boat operation or
maintenance, shell repair, oar painting, dock and compound maintenance, regatta organization, coaching,
crew leader, phone relay, executive ,towing the trailer to regattas, fundraising, promotion, web site, etc)

SIGNATURE _____ **DATE** _____

Parent's / Guardian's SIGNATURE IF UNDER 18 _____

MEMBERSHIP FEES

Senior Recreational	\$ 320 <input type="checkbox"/> – unlimited rowing
Senior Competitive	\$ 400 <input type="checkbox"/> – registered competitive with Rowontario & RCA
University Summer Fees	\$ 215 <input type="checkbox"/> – academic institution registration required
High School (Junior)	\$ 145 <input type="checkbox"/> – to the club + additional school and regatta fees
Young Competitive	\$ 225 <input type="checkbox"/> – summer fees for current high school rower
Young Non-competitive	\$ 150 <input type="checkbox"/> – summer fees for current high school rower
Learn To Row Program	\$ 180 <input type="checkbox"/> – weekend camp or <input type="checkbox"/> twice a week for one month
Summer Camp	\$ 150 <input type="checkbox"/> – one week day camp, July 4 - 8, 2011
Family	\$ 320 or \$400 <input type="checkbox"/> + \$200 for each additional family member
Short term fee	Determined by treasurer
Associate	no charge (non-rowing coach or coxswain)
Private boat storage	\$200 <input type="checkbox"/>

Learn to Row (LTR) and High School (HS) fees **include a Club T-Shirt** in S, M, L, or XL (*please circle one*)

LTR club fees can be applied towards a full membership in the same year.

Please read and sign!

I authorize RCA, RowOntario and the Island Lake Rowing Club to collect and use personal information about me / my child / ward for the reasons listed below.

Receiving solicitation from RCA Sponsors such as MBNA
Receiving solicitation from within RCA for other commercial activities
Posting rosters, statistics, images and results on RCA's website

I authorize Island Lake Rowing club to include my phone number on a club phone list to be distributed to current club members only.

I agree that my picture can and will be used by Island Lake Rowing Club for promotional purposes.

****We will not sell or distribute your personal information to a third party!****

Members Name: (please print) _____

Members Signature: _____

Parent's, Guardian's Signature if under 19: _____

Date: _____

**Please complete this waiver and give it to one of the coaches or mail to:
Island Lake Rowing Club
c/o Cathy Wilson
595 Highpoint Sideroad
Caledon, ON L7K 0J6**