

Columbia Rowing Club

2009 Membership Form



Today's Date: _____

Member Information

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-Mail: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Membership Category (Check One)

_____ **Single Membership** (Includes use of facility and club equipment) **\$160 per year**

- Half of the Learn to Row fee will be applied toward full membership.
- Beginning in July, dues are \$20 per month through the end of the year
- In November and December, new members can elect to pay next year's dues early and forgo the current year's dues.

_____ **Married Couples Membership** (Beginning in July – \$33 per month) **\$260 per year**

_____ **Family Membership** (Beginning in July – \$40 per month) **\$320 per year**

_____ **Associate Membership** (Includes use of facility) **\$100 per year**

Boat Storage

Rates: Singles: \$100/year Doubles: \$200/year Fours: \$300/year Eights: \$400/year

- Rates will be prorated for the year from the initial start date
- Membership is required to be eligible for boat storage

Please note: All members must:

- pass the swim test
- watch the rowing safety video
- complete the medical information card
- sign an annual waiver before using the rowing facilities

Dues and boat storage fees are not refundable.

All members are expected to donate at least 10 hours of service to the club annually.

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 membership dues, contact the Club Treasurer.

Make checks payable to "Columbia Rowing Club" and mail form and payment to the Club Treasurer:

George B. Park
Treasurer - Columbia Rowing Club
720 Vintage Lane
Columbia, SC 29210

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 01/01/09 – 12/31/09, 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:

USRowing #: _____

Address: _____

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

Phone: _____ **Date:** _____

Participant’s Signature:

Organization: _____

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:

USRowing #: _____

Address: _____

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

Phone: _____ **Date:** _____

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