

# CHELSEA BOAT CLUB MEMBERSHIP APPLICATION FORM

<b>Membership Category (select one)</b>		
	<b>Club Only</b>	<b>Rowing Program</b>
<b>Youth</b> (under 18)	<input type="checkbox"/> \$50.00	<input type="checkbox"/> \$200.00
<b>Adult</b>	<input type="checkbox"/> \$75.00	<input type="checkbox"/> \$250.00
<b>Family*</b>	<input type="checkbox"/> \$600.00	

\*Family is defined as up to 2 adults and their dependent children 13-18 years old.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Email: \_\_\_\_\_ Rowing Experience: \_\_\_\_\_

Additional Family Members (Please complete if applying for Family Membership)

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

A 20 hour per year volunteer requirement is a condition of membership. In order to keep membership costs low, club members will be responsible for volunteering their time in many ways, including maintaining boats, running clinics, and helping with social events. If you are not able to volunteer, you will be given the option of buying out your time at a rate of \$10.00 per hour.

Please list any special skills we can call upon for special projects, for example: carpentry, plumbing, electrical, computer, accounting, etc. \_\_\_\_\_

All applicants under 18 must complete a swim test. Accommodations and safety equipment will be provided for non-swimmers.

All applicants must agree to comply with the by-laws, rules and regulations of the Chelsea Boat Club, Inc.

Return Completed Application to: Chelsea Boat Club  
c/o Norwich Recreation Department  
75 Mohegan Road  
Norwich, CT 06360

Please make checks payable to Chelsea Boat Club, Inc. and note selected membership category on the check.

## MEDICAL/EMERGENCY INFORMATION

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

### Optional Medical Information

As a member of the Chelsea Boat Club you will be participating in activities where immediate medical attention may not be available. The information gathered on this form is intended to help inform coaches of any pre-existing conditions. If you have certain pre-existing conditions, participation in some boating activities may not be recommended. It is your responsibility to be adequately prepared for participation, including consulting with your physician if indicated and carrying any necessary medications, as well as notifying coaches of any conditions and alerting others as soon as possible if problems do occur. This information will be kept in strict confidence by the Chelsea Boat Club, Inc. and only shared with your permission.

PLEASE CHECK ANY OF THE FOLLOWING CONDITIONS THAT MAY APPLY:

<input type="checkbox"/> Asthma	<input type="checkbox"/> Joint Problems	<input type="checkbox"/> Back Problems
<input type="checkbox"/> Heart Conditions	<input type="checkbox"/> High Blood Pressure	<input type="checkbox"/> Epilepsy
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Allergies	<input type="checkbox"/> Other: _____

For any checked condition, please describe symptoms, how often they occur, how long they last, and how you care for them. \_\_\_\_\_

If you carry medications for any condition(s), what are they? \_\_\_\_\_

**ACCIDENT WAIVER- RELEASE OF LIABILITY- CONSENT FOR MEDICAL TREATMENT-**The undersigned agrees to the fullest extent permitted by law to save and hold harmless and indemnify the Chelsea Boat Club, Inc., City of Norwich, it's elected and appointed officials, employees and volunteers of the City of Norwich and Chelsea Boat Club, Inc. from all liability, loss, cost claim, or damage whatsoever which may be imposed upon or incurred by said parties because of or resulting from the participation in the event shown, even if arising from their own negligence. In the event of an emergency and the parent/guardian/emergency contact person cannot be reached, I hereby give permission to be transported to the nearest medical facility. It is hereby understood and agreed that I shall assume full financial responsibility for any costs over and above which is not covered by my health insurance. A photostatic copy of this waiver form with my signature shall be considered as valid as the original.

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 be a complete and unconditional release of 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.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PARENTAL CONSENT (if under 18 yrs)** I hereby give permission for my child to participate in Chelsea Boat Club, Inc. programs. I understand the programs are physically demanding, but I feel my child has the ability needed to participate. I hereby agree to the conditions seen above.

Printed Name of Parent/Guardian \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

## Chelsea Boat Club, Inc. – Waiver

IN CONSIDERATION of being given the opportunity to participate in any Chelsea Boat Club, Inc. Program Activities ("Activity"), I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree and represent that I understand the nature of these 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/PADDLING 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 participant in the Activity 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 the Chelsea Boat Club, Inc., City of Norwich, Norwich Recreation Department, 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 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 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 also agree to follow the by-laws, rules and policies of the Chelsea Boat Club, Inc.

**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 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: Day** \_\_\_\_\_ **Evening** \_\_\_\_\_ **E-Mail** \_\_\_\_\_

\_\_\_\_\_  
**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: Day** \_\_\_\_\_ **Evening** \_\_\_\_\_ **E-Mail** \_\_\_\_\_

\_\_\_\_\_  
**Parent/Guardian Signature (only if participant is under the age of 18)**