

YOUTH ROWING CAMP APPLICATION 2010

Session # _____

_____ _____	_____ _____
Last Name	First Name

_____ _____	_____ _____		
Address	City		
_____ _____	_____ _____	_____ _____	_____
Province	Postal Code	Birth Date dd/mm/yyyy	Gender (M/F)
(_____ _____ _____)_____ _____	(_____ _____ _____)_____ _____		
Telephone #1 (Res.)	Telephone #2 (Business or Cell)		
_____ _____			
E-Mail			
_____ _____	_____ _____	(_____ _____ _____)_____ _____	
Emergency - Contact Name	Relation	Telephone	
_____ _____			
Alberta Health Care Number			
How did you find out about us? _____			

Signature (Applicant)

Signature (Parent or Guardian)
Required if Applicant is under Age 18

Dated: Calgary, _____ day of _____ 20__

Cancellation/Change Policy:

Changes or cancellations will be accepted up to five business days before the start of class and are subject to a \$35 administration fee. No refunds or changes will be permitted in the five days before the start of class.

VISA NUMBER _____ **EXP** ____/____

Parental or Guardian's Release for Persons Under 18 Years of Age

We request that our daughter or son (the "Applicant") be allowed to participate in the Club's activities. We acknowledge that the releases set out above and executed by the Applicant has been read and understood by us and the Applicant. In consideration of the Club allowing the applicant to participate in rowing/sculling or any other activity of the Club, we hereby release the Club and the staff and the City of Calgary from any and all liability arising from any or all risks and damages, usual or unusual, inherent or otherwise in the sport of rowing or sculling including the possibility of personal injury or death, or the loss of damage to property resulting there from.

In executing this release, we are aware that we are waiving certain rights that we may otherwise have and are not relying on any oral or written statements or representations made by the Club, or the staff to induce the applicant to join the Club.

This release is binding on the undersigned, their respective Heirs, Executors, Administrators and Assigns.

Executed this _____ day of _____, 20____ in the City of Calgary, in the Province of Alberta.

Printed Name of Parent/ Guardian:_____

Signature:_____

Witness:_____

Signature:_____