

Name: _____ Home Phone: _____
(please print)

Address _____

Email (for MHRA business only): _____
(please print)

I **DO NOT** wish to share my phone number / email for club communication

Emergency Contact: _____ Phone: (H) _____ (W) _____

Relationship: _____

IN CASE OF EMERGENCY, We will try to contact the above person. If he/she cannot be reached, I give MHRA permission to take my child _____ to the nearest hospital for emergency care.

*Signature of parent / guardian: _____ Date: _____

ROWING IS BY ITS NATURE A PHYSICAL SPORT. AS SUCH ANYONE PARTICIPATING SHOULD BE IN GOOD PHYSICAL HEALTH. IT IS ADVISABLE TO CHECK WITH YOUR PHYSICIAN BEFORE STARTING ANY NEW SPORT

Allergies / Health Problems: _____

- Junior members **MUST** be supervised by their coach while at the boathouse.
- Use of club equipment shall be determined and supervised by their coach.
- When participating in club sponsored activities, **JUNIOR MEMBERS MAY BE ON THE RIVER ONLY UNDER THE DIRECT SUPERVISION OF THEIR COACH**

To complete your membership application:

1. Read and sign waivers: US Rowing, MHRA swim, HRRR Boathouse
2. Complete and sign this membership form, including parent/guardian signatures
3. Return completed forms and membership fee to your coach

I agree to abide by MHRA club and safety rules (posted in MHRA bay at the boathouse and on our web site at www.midhudsonrowing.org)

Signature: _____ Date: _____
(Junior member)

*Signature: _____ Date: _____
(Parent / Guardian)

*** MUST BE SIGNED BY PARENT/GUARDIAN**