
Owen Sound Rowing Club



PO Box 413, Owen Sound, Ontario, N4K 5P1

2018 Registration Form

Member name: _____

Address incl. postal code: _____
City Postal Code

Telephone number: _____

E-mail address: _____

Birth Year (Year only please): _____

Member category:	Recreational	<input type="checkbox"/>	National Team	<input type="checkbox"/>
	Competitive	<input type="checkbox"/>	Touring	<input type="checkbox"/>
	Masters Competitive	<input type="checkbox"/>	Adaptive Competitive	<input type="checkbox"/>
	Learn to Row	<input type="checkbox"/>	Adaptive Recreational	<input type="checkbox"/>
	Administration	<input type="checkbox"/>	Corporate Challenge	<input type="checkbox"/>
			Umpire	<input type="checkbox"/>

We do not sell or distribute your personal information to any other third party.

Member Signature: _____

Date: _____ /2018

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MEMBERSHIP TERMS

- 1) I agree to abide by all rules, by-laws, Policies and Constitution of the club.
- 2) I acknowledge that my Learn to Row fee and all other fees paid to the Owen Sound Rowing Club shall not be returned for any reason in the period following the start of the program.
- 3) I agree and acknowledge that I undertake and activity including rowing, entirely at my own risk and that I am medically fit to undertake any such activity.
- 4) I agree to not hold the Owen Sound Rowing Club liable in any way for any personal injury sustained by myself or any other person and for any loss or any damage to any property that I have brought to the premises whether caused by theft, or any other cause including negligence of the club or any of its members or staff.
- 5) I have read all the above terms and conditions and understand them completely.

Name (please print):

Signature:

Date:

_____/2018

IF UNDER 18 YEARS OF AGE, TO BE CO-SIGNED BY PARENT OR LEGAL GUARDIAN

Name (please print):

Relationship:

Signature:

Date:
