



## 2020 Fall Adult Team

The objective of the MVRC Adult team is to develop everyone equally, which will provide the ability to compete against other rowing clubs in the nation, racing is not required but strongly encouraged.

<b>Dates</b>	<b>Time</b>	<b>Cost</b>
August 31-November 16th. M,W,F	6:00 PM-8:00 PM	\$300 Seasonally or \$1,000 Annually

**Where:** Belle Vernon Boat Launch

**How to Register:** Mail attached registration and payment to Mon Valley Rowing Club (PO Box 913, Rostraver, PA 15012) or drop-off, Monday-Thursday, at The Bible Chapel, Rostraver (203 Johnson Avenue, Belle Vernon, PA 15022.)

**Notes:** All equipment will be provided. Bring a water bottle, socks, and shoes that can get wet. Loose clothes get caught in seat slides, so baggy shorts and long tops are discouraged.

Space is limited.

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### Questions? Contact Us!

Brandon Tucker, MVRC Coach  
703.405.6157 | monvalleyrowingclub@gmail.com  
P.O. Box 913, Rostraver Township, 15012

# Mon Valley Rowing Club Adult Learn to Row Camp Registration

## Participant

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_

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

• Male • Female Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Are you able to swim at least 50 feet and tread water for 60 seconds? • Yes • No

I was referred by: Name \_\_\_\_\_ Phone Number \_\_\_\_\_

T-shirts \$20: Please indicate how many shirts you would like. Include payment upon submitting registration.

Adults Size T-shirt Size: \_\_\_\_ S \_\_\_\_ M \_\_\_\_ L \_\_\_\_ XL

Please provide information about your medical history, including allergies, medication, etc. Please attach an additional form if necessary.

\_\_\_\_\_  
\_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ Group #: \_\_\_\_\_

Physician Name: \_\_\_\_\_ Physician Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

## Emergency contact(s)

Relation: • Spouse • Father • Mother • Other: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_

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

Relation: • Spouse • Father • Mother • Other: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_

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

## **Waiver and Release:**

In consideration of being permitted to participate in the Event (the "Event") sponsored by the Mon Valley Rowing Club (the "Sponsor"), the undersigned parents and/or legal guardians of a child (the "Participant") hereby agrees as follows:

**ACKNOWLEDGEMENT OF RISK:** For myself and on behalf of the Participant, I acknowledge the following: I acknowledge that there are serious risks inherent in participating this Event. I acknowledge that the Participant may be exposed to risks of disease, sickness, injury and even death when he or she participates in the Event. I also acknowledge that there are serious risks involved in traveling to and from the Event. All of these risks are referred to in this agreement as the "Risks".

**ASSUMPTION OF RISK.** I hereby agree, on behalf of myself as parent and on behalf of the Participant, to assume the Risks, and also to assume all other risks of participating in the Event, including without limitation the risk of injury or death and damage to property, which may occur as a result of or in connection with the Participant's presence or participation at the Event in any capacity.

**RELEASE FROM LIABILITY.** I hereby agree, on behalf of myself as parent and on behalf of the Participant, to release, waive, indemnify, defend and hold the Sponsor harmless from any and all Claims for personal injury, death and property damage arising from Participant's presence or participation in the Event in any capacity.

I understand that this fee does not include Accident Insurance and that the Mon Valley Rowing Club assumes no liability.

I further waive any and all claims against Mon Valley Rowing Club (MVRC) and its officers, coaches, volunteers and board members for any unforeseeable event or for injury that may occur during practices or races including transportation to/from races and recognize that if any of the above listed information is false, the player will immediately be disqualified from participating in MVRC.

**AUTHORIZATION FOR MEDICAL CARE:** I authorize any MVRC coach, volunteer or official to act for me in my absence to use his/her best judgment in the event of a medical emergency requiring medical attention. I hereby waive my right to bring any claim against such individual in the exercise of. I recognize that insurance coverage for injuries received during the season is the responsibility of the parent or guardian's insurance policy.

**COVENANT NOT TO SUE.** I hereby agree, on behalf of myself as parent and on behalf of the Participant, not to assert any Claims against Sponsor for personal injury, death or property damage arising from the Participant's presence or participation in the Event in any capacity.

**PHOTO RELEASE.** I hereby agree, on behalf of myself as parent and on behalf of the Participant, to authorize Sponsor to use any photographs, videos and electronic recordings of the Participant for Sponsor promotional purposes.

THE FOREGOING ASSUMPTION OF RISK, RELEASE FROM LIABILITY, COVENANT NOT TO SUE AND PHOTO RELEASE SHALL INCLUDE, BUT NOT BE LIMITED TO, ANY AND ALL CLAIMS RESULTING IN WHOLE OR IN PART FROM THE NEGLIGENCE OR FAULT OF SPONSOR, INCLUDING BUT NOT LIMITED TO NEGLIGENCE OR FAULT IN TRAINING PARTICIPANT WITH RESPECT TO HIS OR HER PARTICIPATION IN THE EVENT, IN PROVIDING FACILITIES AND EQUIPMENT USED DURING THE EVENT, AND IN ANY OTHER RESPECT WHATSOEVER). This release shall not be construed to release Sponsor from or indemnify Sponsor against liability for gross negligence or willful misconduct.

For the purposes of this Agreement, the following defined terms shall have the indicated meanings:

“Claims” shall mean any and all liabilities, losses, damages, costs, expenses (including, but not limited to, attorneys' fees and expenses), causes of action, suits and claims of any nature whatsoever, as may arise from, be based upon or otherwise relate to personal injury or death suffered by Participant, damage to or destruction of property of the Participant, and any other harm or loss or liability as may be sustained by Participant as a result of or relating to or in connection with the Participant's participation in the Event, as well as presence at or travel to and from the Event or any other place where activities related to the Event may take place.

“Sponsor” shall mean the Mon Valley Rowing Club Inc. (MVRC), a Pennsylvania not for profit corporation, and all of Sponsor's trustees, directors, officers, members, agents, employees, representatives, volunteers and other affiliated parties, and their respective heirs, successors and assigns, all of whom shall be entitled to the benefit of the foregoing Assumption of Risk, Release of Liability, and Covenant not to Sue.

If any portion of this agreement shall be held invalid or unenforceable, the remaining portion hereof shall not be affected thereby and shall remain in full force and effect.

This agreement shall be binding upon the undersigned and the Participant and their respective personal representatives, executors, administrators, heirs, next of kin, successors and assigns.

WITH INTENT TO BE LEGALLY BOUND, I do hereby execute and deliver this Release of Claims as of the date set forth.

Participant Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_