

Youth Registration



Rower

Last Name: _____ First Name: _____
 Gender: _____ Date of Birth: _____
 How did you learn about the DCRC?: _____
 Permission to take photos & video (Y/N): _____
 T-Shirt Size (S, M, L, XL, 2XL) _____

Parent

Last Name: _____ First Name: _____

Type of Membership

Annual (Sept - Aug)	\$1,125	Summer (Jul - Aug)	\$440
Fall (Sept - Nov)	\$330	Summer 20 Session Punch Card	\$325
Winter (Nov - Jan)	\$300	Summer 10 Session Punch Card	\$175
Spring (Feb - Jun)	\$570	Summer 5 Session Punch Card	\$90
Spring (Apr - Jun)	\$395	Summer Single Session Drop-In	\$20
		Summer Learn to Row	\$220

Notes

1. Fees include mandatory RCA membership. RCA provides insurance and support services to rowers and clubs. **For insurance to be effective, rowers must register as an RCA member and identify all DCRC programs they participate in on the RCA web site (membership.rowingcanada.org).**
2. Fees include annual DCRC club membership. For selected programs, fees include a T-shirt.
3. Fees do not include regatta fees or expenses as the total cost depends on which regattas are attended and the nature of the expenses (e.g. travel, hotel, meals) required for each regatta.
4. Please provide completed registration, waiver, safety guidelines and medical information forms. Forms and payment can be dropped off at the boathouse at the first practice or mailed to: DCRC, PO Box 32, 114 - 1151 Mount Seymour Rd, North Vancouver, BC V7H 2Y4
5. Fees may be paid by credit card, debit card or cheque. Credit card and debit payments are taken at the boathouse. Please make cheques payable to DCRC or Deep Cove Rowing Club.
6. Before requesting a refund, please see the refund policy at www.deepcoverowingclub.com.
7. Photos and/or video of the rower may be generated during water or land-based activities. The photos and/or video may be used as an aid to training. The photos and/or video may be published to social media, the club web site, club advertising (e.g. brochures), etc. as a record or portrayal of club activities.
8. Personal information will only be used for administration and operation of club rowing programs. Except as described above for photos and video, personal information will not be provided to persons or organizations not involved in the rower's program except as required by law.

Office Use Only

Received Date: _____ Fees Paid: _____
 RCA Member #: _____ Expiry Date: _____

Youth Contact Information



Rower Contact

Last Name: _____ First Name: _____

Home Address: _____

Phone: _____ School: _____

Email: _____

Parent Contact

Last Name: _____ First Name: _____

Mobile Phone: _____ Work Phone: _____

Home Phone: _____

Email 1: _____

Email 2: _____

Alternate Emergency Contact

Last Name: _____ First Name: _____

Relationship to Rower: _____

Mobile Phone: _____ Work Phone: _____

Home Phone: _____

Email: _____



Youth Medical Information

Last Name: _____ First Name: _____
Gender: _____ Date of Birth: _____
BC Personal Health Number: _____
Supplementary Health Insurance: _____
Glasses or contact lenses (Y/N): _____
Date of most recent tetanus immunization: _____
Existing medical & physical conditions:

Current Medications: _____

Allergies: _____

Any other information that may be of assistance to coaches and/or chaperones?

I hereby give permission for the Deep Cove Rowing Club to be responsible for providing proper medical supervision and treatment of the rower named above if required.

	Print Name	Signature	Date
Rower	_____	_____	_____
Parent or Legal Guardian (if rower is less than 19 years old)	_____	_____	_____
Witness	_____	_____	_____

Liability Waiver and Assumption of Risk

BY SIGNING THIS AGREEMENT, YOU WILL GIVE UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE. PLEASE READ CAREFULLY.

In consideration of being given the opportunity to use the equipment and facilities of the Deep Cove Rowing Club (the DCRC) and participate in the programs, activities, events and operation of the DCRC, which include without limitation orientation, instruction, training, practices, competitions, regattas, camps, clinics, special events and related activities on land and on the water (the Activities), and other good and valuable consideration, the receipt and sufficiency of which I hereby acknowledge, for myself and for my next of kin, personal representatives, heirs, executors, estate and assigns:

1. I understand, agree and acknowledge that the Activities require strenuous physical exertion;
2. I understand, agree and acknowledge that the Activities may activate or aggravate pre-existing physical injuries, conditions, symptoms or congenital disorders;
3. I represent that I am in good health and have sufficient physical skills and fitness to perform sustained strenuous physical exertion;
4. I represent that I can swim and tread water for a minimum of 10 minutes;
5. I understand, agree and acknowledge that the Activities involve risks and dangers incidental thereto, including without limitation loss or damage of property, personal injury, disability and death (the Risks) caused by or resulting from without limitation:
 - sustained physical exertion
 - the weight and inertia of carried rowing shells
 - body contact with unyielding, sharp or abrasive objects
 - tripping and falling due to poor footing or obstacles
 - weather including wind, precipitation, sunshine, high and low temperatures
 - immersion in cold water
 - water conditions including waves, currents, tides and low temperatures
 - hypothermia
 - hyperthermia
 - drowning
 - swamping, overturning or upsetting of a rowing shell or boat
 - falling out of a rowing shell or boat
 - collision with manmade or natural objects
 - collision with oars, rowing shells, kayaks, paddleboards, canoes, boats and other watercraft
 - collision with pedestrians, rowers, watercraft users, swimmers and other bystanders
 - improper use of equipment
 - equipment failures
 - inadequate equipment design, implementation or maintenance
 - accidents while loading, unloading and handling of equipment
 - accidents while travelling to or from Activities
 - poor swimming ability of myself or others
 - facility and site hazards
 - the conditions or circumstances in which the Activities take place
 - my own actions and omissions
 - the actions and omissions of other participants in the Activities
 - the actions and omissions of the Releasees named below
 - the negligence of the Releasees named below
 - a breach of any statutory or other duty of care on the part of the Releasees
 - failure of the Releasees to safeguard and protect me from the Risks;
6. I accept and assume all such Risks, the potential consequences of such Risks and responsibility for losses, costs and damages that may result to me from my participation in the Activities;
7. I release, discharge, waive and agree to hold harmless the DCRC and its directors, officers, managers, employees, coaches, instructors, volunteers, representatives, agents, independent contractors and subcontractors and each of their next of kin, heirs, executors, administrators, representatives, estates, successors and assigns (each and all Releasees), from any liability, claims, demands, losses or damages due to the Risks or any cause whatsoever resulting from my participation in the Activities;
8. I agree to indemnify and hold harmless the Releasees from any and all liability, losses or damages to and claims and demands from any third party, whether for loss or damage to property, personal injury or death, resulting from my participation in the Activities;
9. I agree to act in a safe manner in order to minimize the Risks to myself and others;
10. I agree to familiarize myself with and abide by all policies, guidelines, rules and regulations of the DCRC, including without limitation all safety-related policies, guidelines, rules and regulations, regardless of the means by which they are recorded or communicated.

I CONFIRM THAT I HAVE READ AND UNDERSTOOD THIS AGREEMENT PRIOR TO SIGNING IT, I HAVE SIGNED THIS AGREEMENT FREELY WITHOUT ANY INDUCEMENT, REPRESENTATION OR ASSURANCE OF ANY NATURE AND I AGREE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY NEXT OF KIN, ESTATE, HEIRS, EXECUTORS, ADMINISTRATORS, REPRESENTATIVES AND ASSIGNS MAY HAVE AGAINST THE RELEASEES.

Print Name

Signature

Date

Rower

Parent or Legal
Guardian (if rower
is less than 19
years old)

Witness

Safety Policy

All rowers (and their parent or guardian if the rower is less than 19 years old) must review and sign this Safety Policy before the rower can participate in any Deep Cove Rowing Club 'on water' activity.

1. All rowers must be able to swim and tread water for a minimum of 10 minutes.
2. Training sessions will begin promptly, at the scheduled time. Coaches may decide not to boat rowers who arrive late. Coaches will not be responsible for onshore supervision of late arrivals.
3. When carrying a rowing shell to or from the beach, rowers shall maintain a continual watch for pedestrians and other third parties that are at risk of being hit by the rowing shell. Rowers will call out warnings and take any necessary actions to avoid collision.
4. All rowers must be accompanied on the water by a coach, or approved substitute, in a coach boat.
5. Rowers must not proceed beyond the end of the government wharf in Deep Cove until accompanied by their assigned coach.
6. Rowers must stay within sight of the coach boat at all times. Rowers must remain within 500 metres of the coach boat unless directed otherwise by the coach.
7. In the event that a rowing shell must return to shore, a coach must accompany the rowing shell. All other rowing shells under the supervision of that coach must also return to shore.
8. Rowers shall familiarize themselves with docks, rocks and other fixed obstacles in the training or racing area that may pose a risk of collision.
9. Rowers shall familiarize themselves with low bank waterfront landings in the rowing area. In the event of a storm or other unsafe conditions, rowers must immediately proceed to a safe landing area to get off of the water.
10. If a rower accompanies the coach in the coach boat or transfers to the coach boat during a session, the rower must wear a lifejacket.
11. Rowers shall maintain a continual watch for manmade and natural obstacles, other watercraft and swimmers that are in the water and pose a risk of collision. Rowers shall take any necessary steps to avoid a collision.
12. If any part of a rowing session is conducted after sunset and before sunrise, each rowing shell shall carry and operate navigational lights that meet the applicable standards set out in the Canadian government's Collision Regulations.
13. During low light or visibility conditions, each rower must wear an operating flashing light on the head or upper body. Rowers shall be responsible for providing their own lights and must bring them to every training session.
14. Each coach and coach boat shall supervise a maximum of 9 youth or inexperienced adult rowers in a maximum of 3 rowing shells. Each coach and coach boat shall supervise a maximum of 14 experienced adult rowers in a maximum of 4 rowing shells.
15. Coaches are responsible for determining whether conditions are too dangerous to row due to darkness, fog, high winds, waves, ice, cold water, storms, or any other conditions that they determine may be of danger to the rowers. No rower shall contest a coach's decision to cancel or terminate a rowing session due to dangerous conditions. No rower shall be forced to row or shall be penalized for declining to row if they believe the conditions are too dangerous to row safely.
16. Rowing shells shall form groups of two or more where practical. If a rowing shell is swamped or capsizes, the accompanying rowing shell shall ensure the affected rowers are safe (back in the rowing shell or on shore) before going for help. The international distress signal is repeatedly raising and lowering both outstretched arms. Rowers can use their flashing lights to aid in signaling that assistance is required.

I have read, understand, and agree to abide by the DCRC Safety Policy.

Print Name

Signature

Date

Rower

Parent or Legal
Guardian (if
rower is less than
19 years old)

Witness



DEEP COVE CANOE AND KAYAK CENTRE LTD.

Parental Consent for Students or youth involved in Paddle Boarding, Kayaking, Canoeing or Dragon Boat Lessons/Tours/Rentals with Deep Cove Canoe and Kayak Centre

Rental Agreement – I accept the kayak in its present condition and I accept full responsibility for the care of the equipment I am renting. I agree to pay for any damage to the equipment, and to replace the equipment at full retail value if it is lost or stolen. I understand that I will be charged a \$25 late fee if I return the equipment more than 15 minutes after closing, and a \$50 late fee if I return the equipment more than 30 minutes after closing. I understand that if I exceed my reserved rental time and inconvenience other customers I will be charged a rate double that of the regular rental rate for time exceeded.

Rescue- I understand that if I am rescued by Deep Cove Canoe & Kayak Centre Ltd. there will be a \$50 fee per boat payable upon return to Deep Cove Canoe & Kayak Centre Ltd.

DEEP COVE CANOE AND KAYAK CENTRE LIMITED (Herein described as the lessor) does hereby lease the equipment herein described and conducts lessons, tours and rentals on the following terms and conditions:

1 - I, the undersigned give permission for my child/children to participate in paddle boarding, kayaking, canoeing or dragon boat lessons/tours/rentals. I recognize the hazards of boating which are wind, currents, collision with motorboat traffic, waves, drowning, hypothermia and changing weather conditions. I recognize that there is, at all times, a risk of capsize and I agree that my child is responsible for their own actions with regard to safety at all times during lessons, rentals, out trip tours.

2 - Note: Those participants 18 years of age or under must have a parent or guardian signature acknowledging that they are aware of the above risks, terms and conditions.

3 - I agree that this agreement shall in all respects be governed by and interpreted in accordance with the laws of the Province of British Columbia and other governing bodies in this province such as The Canadian Coast Guard.

Current Date: (mm/dd/yy): _____

Program/Rental: _____

Program Start Date/Rental Date: _____

Student/Youth Name: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT
BY SIGNING THIS DOCUMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE OR CLAIM COMPENSATION
FOLLOWING AN ACCIDENT.

PLEASE READ CAREFULLY!

Initial

TO: Essential Cycles Ltd, Ozmosis Training and their directors, officers, employees, instructors, guides, agents, independent contractors, subcontractors, representatives, equipment manufacturers, equipment distributors, successors and assigns, (all of whom are hereinafter collectively referred to as the "RELEASEES").

Name	Last	First	Initial
Address	Street		
	City	Province	Code

RENTAL AGREEMENT

I accept full responsibility for the equipment rented under this Agreement (the "Equipment"). I agree to pay for any damage and replace the Equipment at full retail value if not returned by the agreed date

ACKNOWLEDGEMENT - BICYCLE SAFETY

I acknowledge that I have been advised to wear a helmet while cycling. I also acknowledge that the use of the equipment is subject to all municipal and provincial highway traffic laws. I am familiar with the proper use of the bicycle, including all quick release mechanisms, brakes and gear shifters. I am aware that the RELEASEES is available to answer questions I may have as to the proper use of the equipment.

I undertake and agree to remove myself from participation if I sense or observe any unusual hazard or unsafe condition, or if, at any time, I feel unable or unfit to safely continue for any reason. I understand that the sole responsibility for my personal safety remains with me, including my physical and emotional preparation and fitness to participate in any activities.

ASSUMPTION OF RISKS

I am aware that injuries are a common and expected part of mountain biking. Mountain biking takes place on steep and rugged terrain and features that are both physically and technically challenging and will expose the rider to many risks, dangers and hazards including but not limited to: changing weather conditions; mechanical failure of bicycles, improperly adjusted or maintained equipment; loss of balance; difficulty or inability to control one's speed and direction; variation or changes in the cycling terrain including holes, depressions, loose gravel, rocks, mud, creeks, etc.; impact or collision with structures or objects used in connection with cycling; impact or collision with pedestrians, motor vehicles, horseback riders or other cyclists; impact or collision with trees, tree stumps, forest deadfall, rocks, or other natural or manmade objects on or adjacent to the cycling terrain; encounters with wildlife, including bears; travel on highways and back-country roads; becoming lost and NEGLIGENCE ON THE PART OF THE RELEASEES, INCLUDING FAILURE ON THE PART OF THE RELEASEES TO TAKE REASONABLE STEPS TO PROTECT OR SAFEGUARD ME FROM THE RISKS, DANGERS AND HAZARDS OF MOUNTAIN BIKING. I am also aware that the risks, dangers and hazards referred to above exist throughout the terrain used for cycling, and many are unmarked.

I AM AWARE OF THE RISKS, DANGERS AND HAZARDS ASSOCIATED WITH MOUNTAIN BIKING AND I FREELY ACCEPT AND FULLY ASSUME ALL SUCH RISKS, DANGERS AND HAZARDS AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, PROPERTY DAMAGE OR LOSS RESULTING THEREFROM.

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

In consideration of the rental of the Equipment, I hereby agree as follows:

1. I AGREE TO WAIVE ANY AND ALL CLAIMS that I have or may in the future have against THE RELEASEES and TO RELEASE THE RELEASEES from any and all liability for any damage, expense or injury including death that I may suffer, or that my next of kin may suffer, resulting from or arising out of any aspect of my use of the Equipment, DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT OR BREACH OF STATUTORY DUTY OF CARE, INCLUDING ANY DUTY OWED UNDER THE OCCUPIERS LIABILITY ACT, R.S.B.C. 1996, C. 337, in respect of the selection or maintenance of the Equipment or in respect of the provision or failure to provide any warnings, directions or instructions as to mountain biking safety or the use of the Equipment

- 2 TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any property damage or personal injury to any third party resulting from my use of the Equipment;
- 3 That this Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns, and representatives, in the event of my death or incapacity;
- 4 That this Agreement shall be governed by and interpreted in accordance with the laws of the Province of British Columbia; and
- 5 That any litigation involving the parties to this Agreement shall be brought within the Province of British Columbia shall be within the exclusive jurisdiction of the Courts of the Province of British Columbia and no other jurisdiction..

In entering into this Agreement I am not relying on any oral or written representations or statements made by the Releasees with respect to the safety of Equipment, other than what is set forth in this Agreement.

I CONFIRM THAT I HAVE READ AND UNDERSTOOD THIS AGREEMENT PRIOR TO SIGNING IT, AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS, ASSIGNS AND REPRESENTATIVES MAY HAVE AGAINST THE RELEASEES.

Signed this _____ day of _____, 20____

Signature of Participant	Signature of Renter (if different from user)
Print name of Participant	Print name of Renter
Signature of parent or guardian if user is under 19 years	Witness Signature

This agreement must be completed in full, signed, dated, and witnessed by us prior to receiving your equipment.

RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

BY SIGNING THIS AGREEMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE

Participant's Initials

PLEASE READ CAREFULLY

Participant: First Name Last Name Phone # Date of Birth (dd/mm/yy)
Email Emergency Contact Name Emerg. Contact Phone #
Address City Prov./State Postal/Zip Code Country

TO: HONEYCOMB CLIMBING INCORPORATED and HIVE CLIMBING NORTH SHORE INC. (the "Operators"), all individuals or entities who provide or make available facilities, premises, equipment, or services for the Operators (the "Providers"), and the respective directors, officers, partners, employees, agents, guides, volunteers, independent contractors, representatives, successors and assigns of the Operators and the Providers (all of which, along with the Operators, jointly and severally, are the "Releasees")
In this agreement, the term "Climbing Activities" includes all activities, events or services provided, arranged, organized, conducted, sponsored, or authorized by the Releasees and specifically includes without limitation climbing, bouldering, training, stretching, observing, volunteering, supervising, all school and instruction sessions, and all other activities, events, and services in any way connected with or related to Climbing Activities, whether taking place before, during, or following my participation in Climbing Activities.

INITIALS

ACKNOWLEDGMENT - SAFETY & PHYSICAL CONDITION

I am aware that there are instructors available to answer any questions that I may have as to the proper use of the equipment and regarding known risks inherent in Climbing Activities. I am aware that the physical exertion required of Climbing Activities and the forces exerted on the body can activate or aggravate pre-existing physical injuries, conditions, or congenital defects. I acknowledge that I understand my physical limitations and am sufficiently self-aware to stop physical activity before I become ill or injured. I acknowledge that I should seek medical advice if I know or suspect that my physical condition may be incompatible with Climbing Activities. I further acknowledge that reckless behaviour by me poses serious risk to others and that I will be held responsible for all damage or injury caused to property or persons as a result of my reckless conduct during Climbing Activities. I am aware and acknowledge that there is no obligation for any person to provide me with medical care during Climbing Activities and that there may be no nearby aid stations available for Climbing Activities. I acknowledge it is my sole responsibility to bring effective treatment for allergy or asthmatic attacks I may suffer during Climbing Activities.

ASSUMPTION OF RISKS

I am aware that Climbing Activities involves many risks, dangers, and hazards including but not limited to: falling; loss of balance or control; loss of consciousness; collisions with other persons, equipment, walls, climbing holds, exposed or hidden structural supports or beams, or the floor; shock, stress, or other injury to the body; equipment malfunctions; falling objects; and NEGLIGENCE ON THE PART OF THE RELEASEES, INCLUDING THE FAILURE ON THE PART OF THE RELEASEES TO SAFEGUARD OR PROTECT ME FROM THE RISKS, DANGERS, AND HAZARDS OF Climbing Activities.

INITIALS

I AM AWARE OF THE RISKS, DANGERS, HAZARDS, AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, AND PROPERTY DAMAGE AND LOSS, WHETHER TO MYSELF OR THAT I MAY CAUSE TO OTHERS.

RELEASE OF LIABILITY, WAIVER OF CLAIMS, AND INDEMNITY AGREEMENT

In consideration of the Releasees allowing me to participate in Climbing Activities and permitting my use of their property, venue, or equipment (the "Facilities"), and for other good and valuable consideration the receipt and sufficiency of which is acknowledged, I HEREBY IRREVOCABLY AGREE AS FOLLOWS:

INITIALS

1. TO WAIVE ALL CLAIMS that I have or may in the future have against the Releasees and TO RELEASE the Releasees from any and all liability for any loss, damage, expense, or injury including death that I may suffer, or that my next of kin may suffer, resulting from either my use of or my presence on the Facilities DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, NEGLIGENT MISREPRESENTATION OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE (INCLUDING ANY DUTY OF CARE UNDER THE OCCUPIERS LIABILITY ACT, R.S.B.C. 1996, c.337) ON THE PART OF THE RELEASEES, AND ALSO INCLUDING THE FAILURE ON THE PART OF THE RELEASEES TO SAFEGUARD OR PROTECT ME FROM THE RISKS, DANGERS, AND HAZARDS OF CLIMBING ACTIVITIES;

INITIALS

2. TO INDEMNIFY AND SAVE HARMLESS the Releasees from any and all liability for any damage to property or personal injury of any nature to any third party, resulting from my use of or presence on the Facilities and my participation in Climbing Activities;

INITIALS

3. If medical care is rendered to me as a result of injury, I consent to that care if I am unable to give my consent for any reason at the time the care is rendered;

4. This agreement is effective and binding upon my heirs, next of kin, executors, administrators, assigns, and representatives, in the event of my death or incapacity;

5. This agreement and any rights, duties, and obligations as between the parties to this agreement will be governed by and interpreted solely in accordance with the laws of the Province of British Columbia and no other jurisdiction;

6. Any litigation involving the parties to this agreement must be brought within the Province of British Columbia and the parties attorn to the exclusive jurisdiction of the Courts of the Province of British Columbia;

INITIALS

I am not relying on any oral or written statements made by the Releasees with respect to the safety of Climbing Activities other than what is set forth in this agreement. I confirm that, before signing this agreement, I have read and understood it and am aware that by signing this agreement I am waiving certain legal rights which I or my heirs, next of kin, executors, administrators, assigns, and representative may have against the Releasees.

FOR PARENTS/GUARDIANS OF PARTICIPANTS UNDER 19 YEARS OF AGE

INITIALS

For and on behalf of a participant of minority age, by signing where indicated below, I hereby certify that I am the parent/guardian with legal responsibility for this participant of minority age, and acknowledge the risks associated with the participation by the participant in Climbing Activities and I hereby consent to the participation of the minority age participant in Climbing Activities and agree for myself, my heirs, executors, assigns, and next of kin, to release, indemnify, and save harmless the Releasees from all liabilities, howsoever arising, incident to the participation by the participant of minority age in Climbing Activities.

MEDIA RELEASE: I consent to the taking and use of photographs or video footage of myself, without compensation, for use on hiveclimbing.com, The Hive's social media pages, in newsletters and publications for distribution to members, and promotion of future Hive events by management, attending staff members and other media. I further understand that this consent may be withdrawn by me at anytime, upon written notice.

Signed this _____, day of _____, 20____

Signature of Participant Print Participant's Name Age of Participant
(of Parent/Guardian if under 19 years of age) (of Parent/Guardian if under 19 years of age) Participant

Rowing Camp Waiver for Studio 202

* Required

Name of participant *

Your answer

Name of parent/guardian: *

Your answer

I know of no mental or physical problems which may affect my child's ability to participate safely in yoga and mediation. I consent to emergency medical treatment and I will be responsible for any medical or other charges in connection with attending Studio 202's classes. I, the undersigned, am aware that there is a certain risk of injury involved in my child's participation, and by signing this document I waive and release any and all right to sue, claim for damages of any sort, or any other claim/ remedy I may have against Studio 202 and it's staff, in connection with my or my child's participation in the yoga class included in the Rowing Camp. By signing below, I consent to pictures of my child being used for media/ marketing purposes by Studio 202. I understand the terms in this waiver, and agree to all terms by signing below. *

Your answer



Would you like to receive our monthly newsletter with tips, upcoming events & promos? You can also opt out at any time. *

Yes

No

SUBMIT

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