



Mid Hudson Rowing Association: LTR Information and Safety Certification 2019

Name: _____

Phone (H) _____ (W) _____ (Cell) _____

Address _____

Email (for MHRA business only): _____

(please print legibly)

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

Emergency Contact: _____ Relationship _____

Phone (H) _____ (W) _____ (Cell) _____

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

Allergies / Health Problems that may be impacted by rowing or its associated activities: _____

Please check applicable MHRA 2019 Program(s)

Guest Tank Sessions (Feb 23th) _____

LTR Session I (June 8th – 16th) - Fee: \$150 _____

LTR Session II (July 13th-21st) - Fee: \$150 _____

Sculling Clinic (July 9th-18th)- Fee: \$175 (\$150 for members) _____

Fall into Rowing (September 14th & 15th) – Fee \$60 _____

I have read and agree to abide by MHRA club and safety rules. _____ Yes _____ No

(MHRA safety rules are posted on the MHRA website and in the boathouse)

www.midhudsonrowing.org/safety.html

I can swim 50 yards. _____ Yes _____ No

I can keep afloat for 10 minutes. _____ Yes _____ No

I can put on a life jacket while in the water. _____ Yes _____ No

If you cannot answer yes to these safety statements, please speak with an MHRA coach.

I have completed the 2019 US Rowing waiver on the US Rowing website (required) _____ Yes _____ No

(<http://membership.usrowing.org>; Sign in as an Athlete using our club code: C73BZ)

Signature: _____

Date: _____

Complete this application and mail it with payment to:

Mid Hudson Rowing Association
P.O. Box 683,
Poughkeepsie, NY 12602