

Mid-Hudson Rowing Association: LTR Information and Safety Certification 2024

Please print legibly				
Name:				
Phone (H):	(W):	(Cell):		
Address:				
Email (for MHRA business of	only):			
Emergency Contact:				
Phone (H):	(W):	(Cell):		
HEALTH. IT IS ADVISABL	E TO CHECK WITH YOUR	THOSE PARTICIPATING SHOULD BE IN R PHYSICIAN BEFORE STARTING ANY I	NEW SP	
Please circle the applicable	· MHRA Program(s) you pla	an to participate in this year:		
Try Rowing!	Learn-to-Row,	Sculling Clinic		
I have read and agree to ak (posted here: https://midh	•	fety rules. <u>licies/</u> and in the boathouse)	Yes	No
I can swim 50 yards.			Yes	No
I can keep afloat for 10 mir	iutes.		Yes	No
I can put on a life jacket wh	nile in the water.		Yes	No
If you cannot answer yes to	these safety statements,	please speak with an MHRA coach.		
•	,	er on the US Rowing website (required: ete using our club code: C73BZ)	Yes	No

MHRA Waiver, Release and Hold Harmless Agreement

I acknowledge that participating in activities of the Mid-Hudson Rowing Association (MHRA) involves certain risks (some of which I may not fully appreciate) and that injuries, death, property damage, or other harm could occur to me or others. I accept and voluntarily incur all risks of any injuries, damages, or harm which arise during or result from my participation in the activity. These risks include, but are not limited to, the possibility of accident or illness while traveling to and from events as well as any injury arising out of participation in the physical activity involved with this activity. The MHRA Board of Directors strongly recommends that each club member have an annual physical examination and carry personal health and accident insurance.

I waive all claims against Mid-Hudson Rowing Association, its board of directors, and/or its coaches, volunteers, affiliates, employees, officers, agents, or insurers (Released Parties) for any injuries, damages, losses, or claims, whether known or unknown, which arise during or result from my participation in any MHRA activities. I release and forever discharge the Released Parties from all such claims.

I agree to indemnify and hold the Released Parties harmless from all losses, liabilities, damages, costs, or expenses (including but not limited to reasonable attorneys' fees and other litigation costs and expenses) incurred by any of the Released Parties as a result of any claims or suits that I (or anyone claiming by, under, or through me) may bring against any of the Released Parties which arise during or result from my participation in the activity.

I acknowledge that I have carefully read and reviewed this Waiver, Release and Hold Harmless Agreement. I understand it fully and I execute it voluntarily.

Name (print):	 	 	
Signature:	 	 	
Date:			

Complete this application and mail it or bring it with you to class, with payment.

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