



**Mid-Hudson Rowing Association: Guest Information and Safety Certification 2025B**

*Please check the appropriate statement below:*

\_\_\_\_\_ **I am a guest of a MHRA member and plan to row**

\_\_\_\_\_ **I am a guest and plan to ride in the launch with a MHRA coach\***

\* In compliance with NY State law and USRowing safety standards, our launches are equipped with U.S. Coast Guard approved wearable PFDs for every individual onboard, including those in accompanying rowing shells. For the safety of our guests, MHRA strongly advises all occupants of the launch to wear a PFD.

*Please print legibly*

Name: \_\_\_\_\_

Phone (H): \_\_\_\_\_ (W): \_\_\_\_\_ (Cell): \_\_\_\_\_

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

Email (for MHRA business only): \_\_\_\_\_

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.**

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

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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.*

## **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: \_\_\_\_\_