



LaSalle Rowing Club
1 Laurier Drive,
LaSalle,
Ontario N9J 3L4

Phone # 226-280-8006
Website: www.lasallerowing.ca

2017 General Membership Registration Instructions

The LaSalle Rowing Club asks that you please complete all forms required.

1. General Membership registration
2. Participant Information
3. Release, Waiver, and Assumption of Risk.

Once completed, please mail your completed forms and your payment to the membership secretary at the following address:

Peter Redfern
470 Gaylord Ave.
LaSalle, Ontario N9J 3G1

Please make all cheques payable to LaSalle Rowing Club

Alternatively the forms and payment can be brought to the Boathouse.



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2017 MEMBERSHIP REGISTRATION FORM

Name: _____ Phone # (____) _____

Address: _____ City: _____ Postal Code: _____

Date of Birth: ____/____/____ Emergency Phone # (____) _____
mm dd yy

E-mail: _____ Emergency Contact Person: _____

MEMBERSHIP TYPE	FEE	Check Appropriate Box
Adult Recreational Membership	\$275	
Youth Recreational Membership	\$200	
LTR to Adult Recreational Membership	\$225	
LTR to Youth Recreational Membership	\$100	
Volunteer	\$1	

COURSES COMPLETED	Check if Applicable	Date Certified
First Aid Training		
CPR Training		
Boat Operator's Certificate		
Defib Training		

I understand that, before participating in the LRC Learn-To-Row program and/or as a Recreational Member, I am expected to be familiar with the LRC Policies & Procedures (posted in the Boathouse as well as on the LRC website (www.lasallerowing.ca)).

Date: _____ Signature: _____

Amount paid: _____ Cash _____ Cheque # _____

Office use only: Registration form [] Waiver Form [] Participant Info [] Fee []



LaSalle Rowing Club

2017 PARTICIPANT INFORMATION

Name: _____

Date of Birth: _____/_____/_____
Day Month Year

Emergency contact: _____ Phone: _____

Alternate contact: _____ Phone: _____

Family doctor: _____ Phone: _____

Hospital Insurance Number: _____

Relevant Medical History: Medications: _____

Allergies: _____

Previous injury: _____

Other: _____

Does the participant carry and know how to administer their own medications?

Yes:[] No:[]

Other conditions (braces, contact lenses, etc.): _____

Swimming ability (circle one) : non-swimmer/weak, recreational/intermediate, strong

Note: Medical information is confidential.



LaSalle Rowing Club

Release, Waiver and Assumption of Risk

To the President and Board Members of the LaSalle Rowing Club (hereafter referred to as LRC)

I _____ hereby apply for membership and/or participation in the LRC programs, on the basis as completed on this form.

In consideration of being permitted membership and/or participation in the LRC program, I, for myself, my personal representatives, heirs, and next of kin understand and agree that my signing of this document constitutes my agreement to the following terms & conditions.

1. I am familiar with and agree to abide by all By-law, rules, regulations and policies of the LRC.
2. I acknowledge that my membership fees and all other fees paid to the LRC are non-refundable.
3. I am familiar with and accept that there is the risk of injury and/or death in participation and I agree and acknowledge that I undertake any activity involving LRC equipment and/or facilities, including rowing, weight training and fitness training, entirely at my own risk, and that I am physically, emotionally and medically capable of undertaking such activity.
4. I understand and agree that at all times, the sole responsibility for my personal safety remains with me and I agree that the LRC is not responsible for any personal injury sustained by myself or any other person, or for the loss or damage to any property which I have brought, or may bring, to the premises, whether caused by theft or any other cause, including negligence of the LRC or any of its members, coaches, servants, agents or contractors.
5. I agree to abide by any safety rules and/or guidelines of the LRC and the Canadian Coast Guard. I understand and accept that it is my responsibility to have the following required safety equipment either in my shell or in a coach boat accompanying my shell, failing which I will pay any fines issued for failure to adhere to the safety rules and guidelines: one life jacket for each rower and coxswain; one tow rope; one bailer; a whistle or sounding horn; and one navigation light (flashlight).
6. I agree that a violation of the By-laws, rules or policies of the LRC, including the safety rules and guidelines of the LRC and the Canadian Coast Guard, may result in the suspension or termination of my membership and/or participation, in any programs and/or privileges within the LRC.
7. This Release constitutes an unqualified assumption by me of all risks associated with my participation in LRC activities, events and programs even if arising from the negligence or gross negligence, including any compounding or aggravation of injuries caused by negligent rescue operations or procedures of LRC and any persons associated therewith or otherwise participating in LRC activities, events and programs in any capacity.
8. This Release constitutes a full and final Release and Waiver of Liability and all Claims that I have, or may in the future have, against LRC, any person(s), entities or organization(s) associated in any way with LRC or any one or more of them and their respective directors, officers, employees, guides, contractors, agents and representatives of who are collectively referred to as the Releasees) from any and all liability for any loss, damage, injury, death or expense that I may suffer as a result of my use of or my presence at the LRC facilities or my participation in any part of, or my presence in any capacity at the LRC or LRC activities, events and programs due to any cause whatsoever, including negligence, gross negligence, breach of contract, or breach of any statutory or other duty of care on the part of the Releasees. I understand that negligence includes failure on the part of the Releasees to take reasonable steps to safeguard or protect me from the risks, dangers and hazards of rowing activities.
9. This release constitutes an Agreement not to sue the Releasees for any loss, injury, death, costs or damages of any form or type, however caused or arising, and whether directly or indirectly from my participation in any aspect of LRC.

10. This Release constitutes an Agreement to indemnify and save and hold harmless the Releasees, and each of them, from any litigation expense, legal fees, liability, damage, award or cost, of any form or type whatsoever that they may incur due to any claim made against them or any one of them by me or on my behalf, or that of my estate, whether the claim is based on negligence or the gross negligence of the Releasees or otherwise as stated herein.

11. This release is an Agreement governed by the laws, and the courts, of the Province of Ontario.

I HAVE READ AND UNDERSTAND THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT, I AM WAIVING CERTAIN SUBSTANTIAL LEGAL RIGHTS WHICH I AND MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST THE RELEASEES.

I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT INDUCEMENT.

Name: _____ Signature: _____ Date: _____

Witness: _____ Date: _____

Parental Consent (for anyone under 18 years of age)

I _____ hereby give my son/daughter _____
(child's full name) permission to participate in the activities offered by the LaSalle Rowing Club, and understand the Club membership and financial requirements, as well as all the elements of risk associated with participating in these programs, and hereby agree to all the terms as set out in the Release, Waiver and Assumption of Risk.

Name: _____ Signature: _____ Date: _____

Witness: _____ Date: _____

Consent to post pictures and/or videos on the LaSalle Rowing Club public website (please check one only)

____ Yes, I the undersigned, consent to having my photo published on the LaSalle Rowing Club website at www.lasallerowing.ca. I hereby release the LaSalle Rowing Club from any and all liability and legal or equitable claims of any kind, related to such being published on the website. I acknowledge that any and all participants will be identified on the LCR website, by their first names only.

____ No I, the undersigned, **do not** consent to having my photos (or the photos of my child, if applicable) shared on the LaSalle Rowing Club Website.

Consent to add you to the LaSalle Rowing Club email list

I would like to receive email notifications and club updates. You can unsubscribe at any time.

Rower's Name _____ Rower's Signature (if 18 years or older) _____

Parent/Guardian Name: _____ Parent/Guardian Signature (if under 18 years) _____

Date: _____