

East Lyme Summer Crew 2019

A Program of the East Lyme Rowing Association

For summer 2019, East Lyme Summer Rowing will offer six week-long sessions for middle and high school aged students. The program will run daily from 8:00 to 10:00 a.m. Monday thru Friday at the ELHS Boathouse on Lake Patagansett. This year's program directors are High School Coaches Scott Mahon and Mary Jennings.

Middle School Summer Rowing/Learn to Row

For Middle School students, the focus is on basic rowing, boat handling and the development of a love of rowing in a supportive environment. Athletes will have the opportunity to row with both boys and girls in 4 and 8 seat sweep style boats. They will learn to rig and row while making friends and enjoying the summer. Rowers with previous experience will build on what they learned the previous summer. **No prior experience is required!**

High School Skill Development Program

High School aged students will build on what they have learned in prior summer programs or as novice. The High School program is designed for high school age athletes interested in learning how to row or novice rowers.

Registration

Name of Participant: _____ Adult T-Shirt Size: _____

Name of Parent(s) or Guardian(s): _____

Address: _____ City: _____ State: _____

Home Phone: _____ Parent Cell Phone: _____

Parent E-mail: _____ Athlete E-mail: _____

School/Grade in September 2019 _____ / _____ Date of birth: ____/____/____

Select Weeks: ___ **Week 1** (June 24-June 28) ___ **Week 2** (July 1– July 5) ___ **Week 3** (July 8 – July 12)
___ **Week 4** (July 15– July 19) ___ **Week 5** (July 22 – July 26) ___ **Week 6** (July 29 – Aug2)

Fee: \$125 per week, participate in 4 weeklong sessions (\$500), get 1 week FREE.

Amount Enclosed: _____

Payment can be made by check written to ELRA or by PayPal

Print and sign forms and mail payment confirmation or check with registration and waiver to:

ELRA

57 Spring Rock Rd
East Lyme, CT 06333

OR Bring with you to the first day of camp

All participants receive a complimentary program t-shirt.

If you have any questions, please contact Coaches Scott Mahon: scott.mahon@elpsk12.org or 860-949-5422, or Mary Jennings: Mary.jennings@elpsk12.org or 860-985-8948.

East Lyme Rowing Association

Athlete Authorization, Injury Waiver & General Release Form

As a participant in any East Lyme Rowing Association (aka ELRA) and/or East Lyme High School Crew program, I acknowledge that participation in any event and/or practice exposes me to a possible risk of personal injury. I, hereby release the East Lyme Rowing Association and its officers, directors, coaches and affiliates, from any and all liability from property damage, personal injuries or other claims arising from or in connection with my participation in the program including claims that are known and unknown, foreseen and unforeseen, future or contingent. I covenant that I will not now or at any time in the future, directly or indirectly, commence or prosecute any action, suit or other proceeding against ELRA and its officers, directors, coaches and affiliates, arising out of or relating to the actions, causes of action, claims and demands hereby waived, released or discharged by me. For good and adequate consideration, which I acknowledge I have received, I hereby grant, release, and quitclaim to ELRA the right and authority to use my photograph, likeness for promotional and advertising purposes or programs as ELRA in its sole discretion will deem appropriate. I acknowledge that I have read and fully understand this Injury Waiver and General Release Form. This agreement will be binding on me, legal representatives, heirs, successors and assigns.

I acknowledge, agree and represent that I understand the nature of rowing activities, both on water and land based, and that I am qualified, in good health, and in proper physical condition to participate in such activities.

I verify that as a participant in any ELRA rowing program, I am able to swim 100 yards, tread water for 10 minutes, and swim 10 feet underwater.

DATE: _____

PARTICIPANT PRINTED NAME: _____

PARTICIPANT SIGNATURE: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

EMERGENCY PHONE: _____

EMERGENCY PHONE: _____

PARENTAL CONSENT (*To be completed by parent/guardian if participant is under the age of 18*)

The undersigned ("Parent"), parent of _____ ("Subject"), hereby consent to affirm, and, on behalf of Subject, agree to be bound by the Injury Waiver and General Release Form attached hereto which has been signed by Subject. Parents also represent, warrant and agree that Parents (is)(are) entitled to the care and custody of Subject and (is)(are) Subject's legal guardian(s); that during the minority of Subject and for a reasonable time afterwards, Parents will use all reasonable efforts to prevent Subject from attempting to or actually disaffirming the Injury Waiver and General Release Form signed by Subject; that Parents hereby acknowledge that Parents have read the Injury Waiver and General Release Form and are satisfied that it is fair and equitable for the benefit of Subject; and that Parents will not revoke this consent and approval.

DATE: _____ SIGNATURE: _____

NAME AND RELATIONSHIP TO SUBJECT: (please print)

NAME (PRINT): _____ RELATIONSHIP: _____

