

Learn 2 Row Clinics Spring 2023

Princess Anne Crew Club will be holding 1-day training sessions from 8:30 am to 3:30 pm for any high school students interested in learning more about rowing and possibly trying out for the Princess Anne Crew Club.

Training will be held at the club practice site located off Virginia Beach Blvd. at 652 Greentree Drive in the Thalia neighborhood in Virginia Beach.

The training day will be divided into three sections:

- 1. Ground school
- 2. Stationary rowing
- 3. Open water rowin g

Information to be covered includes:

- Types of rowers (boat types, positions on a boat, terminology, etc)
- Time commitments/expectations
- Rowing seasons & practices (fall, winter, spring)
- Role of the Eastern Virginia Scholastic Rowers Association
- Regatt as
- Parent participation
- Cost to participate

Participating rowers must bring:

- Lunch, snacks, reusable water bottle
- Sun screen, bug spray, hat, sunglasses
- Signed packet of forms
- \$10.00 participation fee (covers extra water and gas for the coach's boat)
- USRowing Waiver



Princess Anne Crew Club

Rower and Parent Information Sheet

Rower Name (Male/Female):

Rower Age:		Graduation Year:
School:		
Rower Cell Phone:		Text Okay?
Home Phone:		
Rower Email (non-so	chool accounts only pleas	ese):
Please provide an email ny practice cancellations		regularly by the rower. This is how we will inform you of
Rower Address:		
City:	State:	Zip:
lf yes, please tell ι	ıs about your row	ving experience:
	<u>-</u>	
Do you have asthn	na or other health	ving experience:
Do you have asthm	na or other health	conditions that we should be aware of?
Do you have asthm (If you have asthma, p How did you hear a	na or other health lease bring your inhale about the Princess 1 Name (Male/Female	conditions that we should be aware of? ler to practice with you every day) s Anne Crew Club?
(If you have asthma, p How did you hear a Parent / Guardian Email:	na or other health lease bring your inhale about the Princess 1 Name (Male/Female	conditions that we should be aware of? ler to practice with you every day) s Anne Crew Club?
Do you have asthm (If you have asthma, p How did you hear a Parent / Guardian Email: Cell Phone:	na or other health lease bring your inhale about the Princess 1 Name (Male/Female	conditions that we should be aware of? ler to practice with you every day) s Anne Crew Club?

Princess Anne Crew Club's Liability Waiver



IN CONSIDERATION of being given the opportunity to participate in any Princess Anne Crew Club (Clubs) activity, including scheduled, supervised club activities, and registered regattas, during the period of 03/01/2023 - 07/31/2024, I, for myself, my personal representatives, assigns, heirs, and next of kin.

- 1. 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 Activity.
- 2. I FULLY UNDERSTAND that: (a.); ROWING ACTIVITIES INVOLVE RISKS AND DANGERS of serious bodily injury, including permanent disability, paralysis and death ("Risks"); (b.) these Risks and dangers may be caused by my own actions, or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or the negligence of the Releasee named below; (c.); there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in the Activity.
- 3. I AGREE AND WARRANT that I will examine and inspect each Activity in which I take part as a member of the Clubs and that, if I observe any condition which I consider to be unacceptably hazardous or dangerous, I will notify the proper authority in charge of the Activity and will refuse to take part in the Activity until the condition has been corrected to my satisfaction.
- 4. I HEREBY RELEASE, discharge, and covenant not to sue US Rowing, the Clubs, their administrators, directors, agents, officers, volunteers and employees, other participating regatta organizers, any sponsors, advertisers, and if applicable, owners and lessors of premises, on which the Activity takes place, (each considered one of the Releases herein) from all liability, claims, demands, losses or damages on my account caused or alleged to be caused in whole or in part by the negligence of the Releases or otherwise, including negligent rescue operations; and I further agree that if, despite this release and waiver of liability, assumption of risk, and indemnity agreement, I, or anyone on my behalf, makes a claim against any of the Releases, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releases, from any litigation's expenses, attorney fees, loss, liability, damage, or cost which any may incur as a result of such claim, to the fullest extent permitted by law.
- 5. I AGREE to be familiar with, comply with, and be bound by the Rules and Regulations of USRowing, including but not limited to the USRowing Rules of Rowing (www.usrowing.org), the World Anti-Doping Code (www.usada.org), and the codes, rules, policies and procedures of the U.S. Center for SafeSport (the "SafeSport Rules," www.SafeSport.org), including with respect to the exclusive authority and jurisdiction of the U.S. Center for SafeSport to investigate and resolve reported sexual misconduct and the discretionary authority to investigate and resolve reports of other misconduct. I further agree that arbitration pursuant to the binding arbitration provisions of the SafeSport Rules shall be the exclusive method to resolve any dispute over any disciplinary action taken by USRowing as a result of a USCSS investigation (the "Arbitration Procedure"). I have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.
- 6. IN CONSIDERATION of being permitted to compete, officiate, observe, work, or participate in any way in the EVENT(S), I for myself, my personal representatives, heirs, and next of kin:
 - 1. Affirm that I have not been diagnosed with, demonstrated any symptoms of or have in any way been exposed to any communicable diseases (including but not limited to the virus commonly referred to as COVID-19) within the last 14 days, or that I have complied with all local, state and federal guidelines and regulations as related to communicable diseases;
 - Acknowledge that I am aware that by entering the premises and participating in rowing-related and sponsored activities that there are risks to me and to those with whom I interact of exposure, directly or indirectly, to communicable disease(s) including but not limited to the virus "severe acute respiratory syndrome coronavirus (SARS-CoV-2)", "COVID-19" and/or any mutation or variation thereof;

- 3. HEREBY RELEASE, discharge, and covenant not to sue USRowing, the Club, the Regatta, their administrators, directors, agents, officers, volunteers and employees, other participating regatta organizers, any sponsors, advertisers, and if applicable, owners and lessors of premises, on which the Activity takes place, all for the purposes herein referred to as "Releases", from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any and all loss or damage, and any claim or demands therefore, whether caused by the negligence of the Releasees or otherwise;
- 4. HEREBY agree to INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage, or cost they may incur arising out of or related to my illness or death, whether caused by the negligence of the Releasees or otherwise.

I HAVE READ THIS COMMUNICABLE DISEASE RELATED HOLD HARMLESS, RELEASE, WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT, UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GI VEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Printed Name of Participant:	Date:
Address:	
Phone:	
Signature (only if age 18 or over)	
PARENTAL CONSENT AND I, the minor's parent and/or legal guardian, understand the nature of row and capabilities and believe the minor to be qualified to participate in su covenant not to sue, and AGREE TO INDEMNIFY AND SAVE AND HOLD all liability, claims, demands, losses, or damages on the minor's account capart by the operations, and further agree that if, despite this release, I, the makes a claim against any of the above Releases, I WILL INDEMNIFY, SA' Releases from any litigation expenses, attorney fees, loss liability, damage, such claim.	ch activity. I hereby release, discharge, HARMLESS each of the Releases from used or alleged to be caused in whole or minor, or anyone on the minor's behalf VE, AND HOLD HARMLESS each of the
Printed Name of Parent/Guardian:	Date:
Address:	
Phone#:	
Parent/Guardian Signature (only if participant is under the age of 18):	· · · · · · · · · · · · · · · · · · ·

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Revised: 01/01/2023

Princess Anne Crew Club Photo / Video Consent Release Form

I hereby grant permission to the rights of my image, likeness and sound of my voice as recorded on audio or video tape without payment or any other consideration. I understand that my image may be edited, copied, exhibited, published or distributed and waive the right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of my image or recording. I also understand that this material may be used in diverse athletic / sports settings within an unrestricted geographic area.

Photographic, audio or video recordings may be used for the following purposes:

- promotion of PA Crew events and / or fundraising
- promotion of PA Crew on PA Crew website and all PA Crew social media accounts including, Facebook, Twitter, and YouTube
- informational PA Crew presentations
- on-line training videos or slideshows
- instructional videos

By signing this release, I understand this permission signifies that photographic or video recordings of me may be electronically displayed via the Internet or in the public educational setting. I will be consulted about the use of the photographs or video recording for any purpose other than those listed above. There is no time limit on the validity of this release nor is there any geographic limitation on where these materials may be distributed.

This release applies to photographic, audio or video recordings collected as part of any official PA Crew practices, regattas, or team events including but not limited to team dinners, End-of-Year award parties, fundraisers, team workdays, and training clinics.

By signing this release, I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I hereby release any and all claims against any person or organization utilizing this material for educational purposes.

Full Name				
Street Address/P.O. Box				
City		State	Zip	
Phone				
Non-school Email Address				
Signature	Date	· · · · · · · · · · · · · · · · · · ·		
If this release is obtained from a athlete's parent or legal guardia	student athlete und n is also required.	ler the age of 18	, then the signature of th	at student
Parent's Name				
Parent's Signature	· · · · · · · · · · · · · · · · · · ·	Date		Revised



Princess Anne Crew Club Swimming Safety Video and Swimming Ability Acknowledgement

All Princess Anne Crew Club Learn to Row Clinic rowers are required to view the U.S.Rowing Safety Video once a year. It can be found online at http://www.usrowing.org/safety-video/.

A signed form is required from each rower and her / his parent or guardian stating they have viewed the U.S.Rowing Safety Video and understand all of the program's safety protocols. Additionally, the parent or guardian of the rower must state that their rower does in fact know how to swim and is able to tread water. This form is to be used in conjunction with the Princess Anne Crew Club Liability Waiver.

I, <i>(rower's name)</i> U.S.Rowing Safety Video	, acknowledge that I have viewed the and understand all of the program's safety protocols.
l, (parent's / guardian's name) SON kr	, acknowledge that my daughter / nows how to swim and tread water.
Rower's Name	Parent's / Guardian's Name
Signature	Signature
Date	Date

Revised 3/12/21



Princess Anne Crew Club (PACC) PART I: ACKNOWLEDGEMENT OF RISK AND INSURANCE STATEMENT

(To be completed and signed by parent/guardian)

I give permission for	(name of
child/ward) to participate in any of the following sports that are not crossed out: r	
conditioning, running, weight lifting.	
I am aware that with the participation in sports comes the risk of injury to my chil	d/ward. I understand that
the degree of danger and the seriousness of the risk varies significantly from one	•
contact sports carrying the higher risk. I have had an opportunity to understand t	the risk inherent in sports
through meetings, written handouts, or some other means.	
He/she has medical/accident insurance (yes no);	
Name of Medical Insurance Company:	
Policy Number:	
Name of Policy Holder:	
I am aware that participating in sports will involve travel with the team. I acknowl	edge and accept the risks
inherent in the sport and with the travel involved and with this knowledge in mind	d, grant permission for my
child/ward to participate in the sport and travel with the team.	,

By this signature, I hereby consent to allow the physician(s) and other health care provider(s) selected by myself or PACC to provide treatment for any injury or condition resulting from participating in athletics/activities for PACC during the season covered by this form.

I further consent to allow said physician(s) or health care provider(s) to share appropriate information concerning my child that is relevant to participation in athletics and activities with coaches and other PACC personnel as deemed necessary.

To access quality, low-cost comprehensive health insurance through FAMIS for your child, please contact Cover Virginia by going to www.coverva.org or calling 855.242.8282

PART II: EMERGENCY PERMISSION FORM (To be completed and signed by parent/guardian)

Grade :	AGE:	
Student's Name: _	DOB:	
Please list any he an emergency:	alth problems that might be significant to a physician evaluating your child in case	of
Please list any all	ergies to medications/bee stings, etc.:	
Is the athlete curre	ently prescribed an inhaler or Epi-Pen ?YESNO	
List any emergend	cy medication(s):	
Is the athlete pres	ently taking any other medication ?YESNO	
If yes, please list:		
Does the athlete v	vear contact lenses?YESNO	
Date of last Tdap	or Td (tetanus) shot:	
permission to phys	ITHORIZATION: In the event I cannot be reached in an emergency, I hereby give sicians selected by the coaches and staff of Coastal Virginia Community Rowing to e proper treatment for and to order injection and/or anesthesia and/or surgery for the ove.	е
	act Information: Imber (where to reach you in emergency): ne number (where to reach you in emergency):	-
Signature of parer	nt or guardian: Date:	
Relationship to atl	nlete:	
	nission Form may be reproduced to travel with respective teams and is acceptable fent if needed. I certify all the above information is correct:	or
Parent/Guardian S	Signature:	