



Princess Anne High School 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-school accounts only please*): _____

(Please provide an email address that is checked regularly by the rower. This is how we will inform you of any practice cancellations.)

Rower Address: _____

City: _____ **State:** _____ **Zip:** _____

Have you ever rowed before? Yes / No

If yes, please tell us about your rowing experience:

Do you have asthma or other health conditions that we should be aware of?

(If you have asthma, please bring your inhaler to practice with you every day)

How did you hear about the Princess Anne Crew Club?

Parent / Guardian 1 Name (Male/Female): _____

Email: _____

Cell Phone: _____ **Text Okay?** _____

Parent / Guardian 2 Name (Male/Female): _____

Email: _____

Cellular Phone: _____ **Text Okay?** _____

Revised3/12/21

For Use During Year 20_____