

THREE RIVERS ROWING ASSOCIATION CONSENT AND RELEASE FROM LIABILITY FORM

Activity, as used herein, shall include any organized, supervised or authorized rowing, paddling or conditioning activities, on or off the water, in which a member or guest of Three Rivers Rowing Association (TRRA) or an affiliated group may engage.

INSTRUCTIONS

1. Persons age 18 and over, complete PART A only.
2. Persons under age 18 must complete PART A and have parent or guardian sign PART B.

PART A — CONSENT AND RELEASE FROM LIABILITY

By participating in the Activities, as defined above, I agree to abide by and be bound by the statements and representations below from the outset to the conclusion of my participation. I further agree to notify in writing an officer or director of TRRA of any change in my condition which might affect my ability to participate safely.

1. I currently have no known physical or mental condition that would impair my capability for full participation as intended and expected of me. I am a competent swimmer.
2. I understand and appreciate that participation in the Activities, despite all reasonable precautions implemented for my safety as a participant, carries a risk of serious injury, including death. I also understand and appreciate that controlling that risk is a responsibility that as a participant I must share.
3. By my continued participation, I voluntarily and knowingly assume the risk of injury resulting from my participation.
4. I hereby release, discharge and forever waive any causes of actions, suits, claims and demands whatsoever, in law or in equity, which I may have or which my heirs, executor or administrator may hereafter may have against TRRA, USRowing, USA Canoe and Kayak, their employees, officers, directors, governors or advisors, any affiliated group or any individual or entity holding legal title to any property or premises upon which Activities are conducted, or any USRowing or USA Canoe and Kayak sanctioned event, excluding however, any such causes of actions, suits, claims or demands resulting from intentional misconduct or gross negligence. I understand that this will preclude me from suing in the event I am accidentally injured while participating in an Activity.
5. I give consent for the TRRA to provide, at my expense, medical/athletic training attentions, transportation, housing, meals, and emergency medical services as warranted. If I choose to obtain these attentions and services from others, I accept full responsibility for such actions and their consequences.
6. I agree to abide by the general rules of conduct prescribed for participation in this Activity.
7. I agree to assume financial responsibility for any health or other personal loss incurred while participating in Activities that are not covered by my insurance and other insurance coverage that may be provided to all participants in these Activities.
8. I hereby give permission to the TRRA to photograph me while engaged in Activities and to use such photographs in TRRA promotional and fund raising materials, including without limitation on the TRRA web site, and in membership packages, brochures, magazine, video, television, newspapers and newsletters. The photograph may or may not contain a caption identifying any individuals.

Name	(Please Print)	Signature	Date
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PART B — PARENT/GUARDIAN CONSENT (If participant is under age 18)

I have been given the opportunity to review, and to explain to my son/daughter, the aforementioned stipulated conditions and their ramifications, and I consent to his/her participation in this Activity under the above-stipulated conditions.

Name	(Please Print)	Signature	Date
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