

# REGISTRATION – 2017/18 WINTER

Returning PCC Paddler

PARTICIPANT INFORMATION		
Last Name:	First Name:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Street Address:	City:	
Mailing Address:	<input type="checkbox"/> Same as above	Postal Code:
Phone (Primary):	Phone (Secondary):	
Email Address:		
Date of Birth (YYYY-MM-DD):	NS Healthcard #:	
Health Concerns (describe):	Swimming Proficiency (Red Cross Level Completed):	

PARENT/GUARDIAN/EMERGENCY CONTACT	
Full Name:	Relationship to Participant:
Phone (Primary):	Phone (Secondary):
Email Address:	

MEMBERSHIP DETAILS	
<input type="checkbox"/> 2017/18 HIGH PERFORMANCE WINTER MEMBERSHIP December 1 – March 31, with Head Coach HP Team Selection  <input type="checkbox"/> 2017/18 FULL-TIME WINTER MEMBERSHIP December 1 – March 31, Up to 5 Days per Week  <input type="checkbox"/> 2017/18 PART-TIME WINTER MEMBERSHIP December 1 – March 31, Up to 3 Days per Week	<i>Check only one of the following age divisions:</i> <input type="checkbox"/> U11 – Under 11 years of age on January 1, 2018 <input type="checkbox"/> U13 – Under 13 years of age on January 1, 2018 <input type="checkbox"/> U15 – Under 15 years of age on January 1, 2018 <input type="checkbox"/> U17 – Under 17 years of age on January 1, 2018 <input type="checkbox"/> U19 – Under 19 years of age on January 1, 2018 <input type="checkbox"/> Adult Sprint Racing Program (Masters Racing Team)

## COLD WEATHER PADDLING WAIVER

Due to persisting cold water and air temperatures through the early spring and late fall months, in an effort to maintain a safe environment, all coaches and athletes associated with the Pisiquid Canoe Club are required to adhere to the following guidelines:

- All paddlers, despite their ability, must wear a PFD approved lifejacket from the start of spring training until at least May 1st, during the fall training period from November 1 onwards, and at all other times when the water/air temperature is below 8 degrees Celsius.
- All paddlers must be accompanied by a coach and coach safety boat at all times when on the water.
- No paddler is to be out of sight of a coach or coach safety boat at any time.

This memo must be completed and signed by each paddler (and his/her parent/guardian if under 18 years of age) training on water during the spring and fall.

We have read this cold weather waiver and fully understand its terms:

Name of Participant (please print):	Signature of Participant:
Date:	

Parent or Legal Guardian (please print):	Signature of Parent or Legal Guardian:
Date:	



**WAIVER OF LIABILITY**

To become a member of Pisiquad Canoe Club, the participant(s), his/her parent(s) and for legal guardian(s) (collectively the "Applicants"), all of whom are signed below, agree that Pisiquad Canoe Club and all of the directors, officers, employees and representatives shall have no legal liability whatsoever for any injuries or losses sustained by the Applicants resulting from attending the programs and events sponsored by Pisiquad and the use of equipment and facilities of Pisiquad Canoe Club.

The Applicants agree to indemnify and hold harmless Pisiquad Canoe Club and its respective directors, officers, employees and representatives against all liabilities whatsoever resulting from any injuries or losses as referred to above.

The Applicants agree that this Waiver shall bind any servant agent, invitee, guest, spectator, or any other person associated with the Applicants.

The Applicants acknowledge that all the activities to be carried out by Pisiquad Canoe Club have an inherent risk of personal injury, property damage and loss or theft of personal property and the Applicants acknowledge and confirm that they are well aware of and understand these risks and that the participant(s) is/are taking part in the activities at Pisiquad Canoe Club voluntarily. The Applicants warrant that the participant is in good health and is able to freely participate in the activities carried out by Pisiquad Canoe Club and health restrictions, if any, have been noted on the Registration Form.

The Applicants agree to be bound by all the rules and regulations as may be published from time to time, which govern activities and the use of the facilities of Pisiquad Canoe Club.

**REFUND POLICY**

If for what so ever reason the program that you have registered for is cancelled by Pisiquad Canoe Club, a full refund will be issued.

Spring/Fall Membership - Participants of the spring program will have the first 5 days of the program to withdraw. The registrar must be notified within 5 days of the start of the program if a refund is to be issued less a \$50 administration fee.

**No refund will be issued if a participant leaves a program due to a disciplinary issue.**

**PHOTO RELEASE**

We are extremely fortunate to have local National Team members regularly visit and help promote our club. For future events and opportunities, we ask your authorization to use photos/video of your child in any PCC promotion material.

- Yes
- No

We have read this waiver and fully understand its terms:

Name of Participant (please print):	Signature of Participant:
Date:	

Parent or Legal Guardian (please print):	Signature of Parent or Legal Guardian:
Date:	

Participant Last Name:	First Name:
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### 2017/18 MEMBERSHIP RATES

A full description of each program can be found on our website [www.pisiquidcanoeclub.ca](http://www.pisiquidcanoeclub.ca)

2017/18 WINTER MEMBERSHIP (December 1 – March 31)					
AGE DIVISION	HIGH-PERFORMANCE	FULL TIME	PART-TIME		PROGRAM COST
U11	N/A	\$325	\$175		=
U13	N/A	\$325	\$175		=
U15	\$375	\$325	\$175		=
U17	\$375	\$325	\$175		=
U19	\$375	\$325	\$175		=
Adult / Masters Racing	N/A	\$325	\$175		=

**TOTAL PAYMENT DUE:** =

**PAYMENT FOR MEMBERSHIP IS DUE AND MUST BE RECEIVED IN FULL PRIOR TO STARTING THE PROGRAM. NO ATHLETE SHALL BE ALLOWED TO PARTICIPATE WITHOUT PAYMENT OF THEIR REQUIRED MEMBERSHIP FEES.**

Post-dated cheques are accepted and must be created for the first day of each month (December 1, January 1 & February 1)

PAYMENT INFORMATION	
INDICATE FORM OF PAYMENT: <input type="checkbox"/> Cash <input type="checkbox"/> E-Transfer # _____ <input type="checkbox"/> Cheque(s) # _____	
Contact Name:	Phone:
Email Address:	

Please forward payment, completed registration form, insurance waiver and **proof of age** to the address listed above.  
 All documentation must be received in order to secure a place in a program. PROGRAM SPACE IS LIMITED.

**ENCLOSED:**

- Completed Registration Forms
- Payment
- Cold Weather Paddling Waiver
- Waiver of Liability
- Proof of Age