

Fundraising

I agree to participate in club fundraising this year to a level of \$75 per athlete/member. I recognize that I will receive notification of fundraising activities well in advance of the actual events. Initial _____
Cheque can be made to SRCC and dated for September 30, 2010. When the commitment is realized, the cheque will be returned.

Volunteer Hours

I agree to volunteer 16 hours of my time to help support the activities of SRCC. Volunteer sheets will be provided at SRCC activities where I can write my name and record my time. Initial _____
A cheque in the amount of \$200 can be made to SRCC and dated for August 10, 2010. When the commitment is realized, the cheque will be returned.

Boat Description

I currently own and store my own boat(s) in the boathouse. I will provide a description below of my boat(s). Initial _____

Office Use *Payment must be made in full unless previous arrangements have been made with SRCC Treasurer.*

Level of Participation: _____ Amount Paid: _____

Paid by: Cheque # _____ Cash _____

Saskatoon Racing Canoe Club
Participant's Agreement & Acknowledgement of Risk

Saskatoon Racing Canoe Club (SRCC) is a non-profit organization established for the benefit of its members and others who participate in its programs and activities (the "SRCC Programs").

In consideration of my participation in the SRCC Programs, I hereby agree to the terms and conditions in this agreement.

Awareness of Risks

I am aware that participating in the sport of sprint canoe and kayaking involves risks, including risk of personal injury, death, property damage, expense and related loss, including loss of income. These risks arise as a result of my participation in the SRCC Programs, including training, competition, travel and transportation. Initial _____

Medical Fitness and Treatment

I am fully aware of the nature of the SRCC Programs in which I may participate, and I am of the informed opinion that I am qualified, in good health, and in proper physical condition to participate in such Programs. I further agree and warrant that if at any time I believe that my health and physical condition have changed such that it would be unsafe for me to continue to participate in the Programs, I will immediately discontinue my participation. I hereby give my consent to have any coach, assistant coach, trainer or other SRCC official act as my surrogate in securing ambulance service and to have an athletic trainer and/or doctor of medicine or dentistry provide me with medical assistance and/or treatment under whatever conditions are necessary to preserve my life, limb or well-being. Such consent shall not, however, establish a fiduciary relationship, nor be considered a power of attorney or health care proxy. I further agree to be responsible financially for the cost of each assistance and/or treatment rendered. Initial _____

I acknowledge that I have read and understand this agreement, and that I am agreeing to abide by its terms.

Part 1 I am 18 years of age (or older). I have read and understand this document prior to signing.

Participant Signature _____ Date _____

Part 2 Being parent (or legal guardian) of _____, I agree that the Participant's Agreement & Acknowledgement of Risk shall be binding upon my child.

Parents Signature _____ Date _____