Maine Indoor Rowing Championship 2015 Waiver and Release Packet

Step 1: Please complete an online USRowing waiver*

For those that are not affiliated with a rowing club (i.e. high school, college students, CrossFit members, solo rowers) you may register through USRowing online here.

If you are associated with a rowing club, please make sure your USRowing waiver is up-to-date

*While we prefer that waivers be completed online, if you have any difficulty, you may use the paper waiver included in this packet

Step 2: Please print and complete the Finley Recreation Center Waiver. Bring this with you on competition day.

Step 3: Please print and complete the below photo release. Bring this with you on competition day.

Release of Liability

- IN CONSIDERATION of being given the opportunity to participate in any USRowing activity, including scheduled, supervised club activities, and registered regattas, during the policy term 12/31/14 12/31/15, 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 Release 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 USRowing 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 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, (each considered one of the Releasees 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 Releasee 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 Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation 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.

PLEASE DO NOT CHANGE OR ALTER THE WORDING ON THIS WAIVER WITHOUT PRIOR APPROVAL FROM USROWING



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.

Printed Name of Participant:

USRowing #	Date of Birth:
Address:	
City:	State: Zi
Phone:	Date:
Participant's Signature:	
Organization:	

PARENTAL CONSENT (if participant is under the age of 18).

AND I, the minor's parent and/or legal guardian, understand the nature of rowing activities and the minor's experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby release, discharge, covenant not to sue, and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses, or damages on the minor's account caused or alleged to be caused in whole or part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the above Releasee, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss, liability, damage, or cost any may incur as the result of any such claim, to the fullest extent permitted by law.

Printed Name of Parent/Guardian: Address: City______ State ____ Zip____ Phone: _____ Date:____ Parent/Guardian Signature (only if participant is under the age of 18):

This is THE USRowing Release of Liability, which should be copied for your use.



Name:		_ Sex: M F
Address:	***************************************	
Telephone: (home)	(work)	
Date of Birth • 18 and over facility only		
Person to contact in the event of an emer	gency:	
Telephone number:		
Waiver a	nd Release	
In consideration of being allowed to participat or fitness center activities at the Finley Recreat hereby release the facility, its staff, and all emp active or passive negligence, to the fullest exte	tion Center, University of I ployees from " all liability"	New England, I
I recognize there is the possibility of certain un exercise. These include, but are not limited to heartbeat, permanent disability, heart attack, a hereby acknowledge and accept these known a	, abnormal blood pressure and in very rare instances d	, fainting, disorders of
To my knowledge, I do not have any limiting preclude an exercise program or physical activi interest to always check with my physician bef	ity. I further understand th	nat it is in my best
I accept complete responsibility for my health recreation, or fitness program and understand of the Finley Recreation Center or the Univers responsibility for any guest that I sign in- und	that no responsibility is as sity of New England. I fur	sumed by the leaders
Participant's Signature	Date	



PHOTO RELEASE

I hereby grant to the University of New England of Biddeford/Portland, Maine, University Health Care, and UNE affiliates, permission to use my photograph/my child's photograph on their websites or in other official university or affiliate printed publications and/or advertising without further consideration.

I also understand that once my image is posted on a website, the image can be downloaded by any computer user on or off campus with Internet access. Therefore, I agree to indemnify and hold harmless the University of New England and all its employees and affiliates from any claims.

DATE:	
NAME:	
ADDRESS:	
CITY:	
STATE:	
ZIP:	
PHONE:	
SIGNATURE:	
PARENT'S SIGNATURE FOR	
CHILD:	
ORGANIZATION:	