PLEASE FILL OUT THIS FORM AND GIVE IT TO YOUR COACH AT THE FIRST SESSION

Name (Last)		(First)	
Address		City	State/Zip
Home#		Cell#	
Email address_			
Please check t	he applicable choices:		
Under 18	3 y.o Adult	Nereid Boat Club Member	_Non-Member
Level of Rowing	<u>ı Skill</u> :		
Beginner	Intermediate	Competitive/Elite	
Swimming Abilit	: <u>∨</u> :		
Excellent	GoodFair	r (not recommended)	
For Youth only -	- Nereid Swim Certification:		
I have cor	mpleted and submitted my N	Nereid Swim Certification (required fo	r any on-water activities)
Waiver:			
I have cor	mpleted and signed a USRo	owing Waiver (REQUIRED)	
your coach in fu 1x 2x	\$45 \$56 (\$28 per seat) \$68 (\$17 per seat)		the per hour rates below. Please pay
• 8+	\$88 (\$11 per seat)		
	may take a maximum of 10 prowing bug, please join us a		After you finish your 10 private hours,
•	er individual hour – paid in fu or 5 hours – paid in full at the		
Please make cl on the front.	hecks payable to Nereid B	oat Club and give it to your coach	in an envelope that has your name
Participant (und	er 18-Paren/Guardian) Sign	nature and date	
			_
Coach Signature			Date