



MIAMI ROWING CLUB

MIAMI ROWING & WATERSPORTS CENTER, Inc.
3109 Grand Avenue, Suite 332-Miami, Florida 33133

ADULT COACHING APPLICATION

PRIVATE-NON MEMBER HRLY RATE: \$100

PRIVATE-MEMBER HRLY

Private lessons where non-members and members can come and row in a one-on-one session tailored to your skill level and abilities (Beginners & Experienced rowers). We provide the equipment and the Coaching, all you need to do is show up on time and be ready to go

- GROUP COACHING-A Monthly Dues: \$115

Beginning to Experienced Rowers (group size 4 to 10) meets 1x per week 1 1/2 hours each session

- GROUP COACHING-B Monthly Dues: \$140

Beginning to Experienced Rowers (group size 4 to 10) meets 2x per week 1 1/2 hours each session

GROUP COACHING C Monthly Dues: \$190

Beginning to Experienced Rowers (group size 4 to 10) meets 3x per week 1 1/2 hours each session

*APPLICANT'S NAME: (Mr. / Ms. / Mrs.) _____ *Date: _____

*HOME ADDRESS: _____ *APT. NO. _____

*CITY: _____ *STATE: _____ *ZIP CODE: _____

*BEST CONTACT PHONE: (_____) _____ *E-MAIL: _____

OCCUPATION: _____ If Student, Please list school: _____

EMPLOYER: _____ PHONE: (_____) _____

EMAIL: _____

*DATE OF BIRTH: _____ PLACE OF BIRTH: _____ CITIZENSHIP: _____

*GENDER: | Male | Female

**MARITAL STATUS: Single | Married

ARE ANY OF YOUR RELATIVES MEMBERS OF MRC? IF SO, PLEASE LIST: _____

HOW DID YOU HEAR ABOUT MRC? _____

HOW DO YOU PLAN TO USE THE FACILITIES:

Competitive Rowing | Recreational Rowing | Kayaking | Other: _____

*SIGNATURE OF APPLICANT: _____ Date: _____



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REQUIREMENTS:

All Applications must be accompanied with signed copies of the Liability Waiver and Swim Sign-off attached. Access to MRC facilities cannot be allowed without completion of these documents. Thank you.

PAYMENT PROCEDURES:

- Pay by credit card :
 1. **Your account will be billed automatically** by keeping your credit card information on file. You will be notified by email when a payment is made against your account. Please email the attached Credit Card Authorization Form to office.miamirowing@gmail.com th
 2. Dues are on the 1 of the month. Late charge fee \$25 applies for unpaid balance as of the 8 .
- Fee is for supervised coaching and does not include use of the club by the member or boat launching.

BILLING PROCEDURES:

- The Miami Rowing Club does not send invoices or statements.
- Your account will be debited monthly against your credit card or bank account.

COACHING CHANGES AND CANCELLATION:

- Changes:
 - o Requests for any changes in Coaching status must be made in writing to the MRC Finance Administrator elvi@elviavila.com or info@miamirowing.org, 30 days prior to the change taking effect.
 - o Changes must be approved by the Head Coach. st
- Freeze:
 - o You may freeze your Coaching for anticipated absences greater than 2 months and less than 1 year. The admin fee to freeze is \$35.00. Request must be made in writing to the Finance/Administrator. Freeze will become effective the 1 of the month following written request.
- Cancellation:

- o Submit notification of cancellation in writing to the Finance/Administrator for any changes in membership status must be made in writing to the Finance/Administrator or emailed to info@miamirowing.org, 30 days prior to the change taking effect.

MRC USE ONLY:

Date Application Received: _____ Method of payment: _____

Date of Notification: _____ Assigned Membership No. _____

Location Address: 3601 Rickenbacker Causeway, Virginia Key, Florida 33149 Tel (305)325-3661



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Release of Liability

IN CONSIDERATION of being given the opportunity to participate in any rowing activity, including scheduled, supervised club activities, during the dates listed below, I, for myself, my personal representatives, assigns, heirs, and next of kin.

1. 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. 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 Releasee 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. AGREE AND WARRANT that I will examine and inspect each Activity in which I take part as a participant in Miami Rowing Club programs 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. HEREBY RELEASE, discharge, and covenant not to sue the Miami Rowing Club, their administrators, directors, agents, officers, volunteers and employees, 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.

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

Address: _____

CITY STATE ZIP

Phone: _____ Date: _____

Participant's Signature:



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SWIMMING REQUIREMENT FOR USE OF ANY ROWING EQUIPMENT ON THE WATER

I, the undersigned, can tread water for 15 minutes and swim 200 yards.

Signature

Date

Please print your name



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CREDIT CARD AUTHORIZATION FORM

Date: _____

Rower/Company Name: _____

Credit card Billing Address: _____

City: _____ State: _____ Zip: _____

Credit Card: (Check one) Master Card _____ Visa _____

Amount Authorized: _____

Name on Card: _____

Credit Card Number: _____

Expiration Date: _____ Authorization Number: _____

(4 numbers on front or 3 on the back)

E-mail address: _____

Contact Phone: Cell: _____ Home: _____

Signature: _____ Date: _____

Submission of this form is required. (Signature indicates your authorization to charge your credit card for monthly payments of membership dues.) This information will be held in strict confidence. Credit Card form may be emailed directly to elvi@elviavila.com

www.miamiro.org
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