



# MIAMI ROWING CLUB

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

## ADULT COACHING APPLICATION/GUEST ROWER 2025 / PRIVATE CLASS

### PRIVATE

Private lessons ----- Per hour \$125.00

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: \$190.00

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

—

### GROUP COACHING-B Monthly Dues: \$250.00

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

—

### GROUP COACHING C Monthly Dues: \$315.00

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

### GUEST ROWER PER DAY \$30.00 PER WEEK \$120.00

\*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 the school: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_

EMAIL: \_\_\_\_\_

\*DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_ CITIZENSHIP: \_\_\_\_\_

ARE ANY OF YOUR RELATIVES' MEMBERS OF MRC? IF SO, PLEASE LIST THE FOLLOWING: \_\_\_\_\_



# MIAMI ROWING CLUB

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

HOW DID YOU HEAR ABOUT MRC? \_\_\_\_\_

Competitive Rowing    |    Recreational Rowing    |    Kayaking    Other: \_\_\_\_\_

HOW DO YOU PLAN TO USE THE FACILITIES:

\*SIGNATURE OF APPLICANT: \_\_\_\_\_ Date: \_\_\_\_\_



# MIAMI ROWING CLUB

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

## REQUIREMENTS:

All Applications must be accompanied by signed copies of the Liability Waiver and Swim Sign-off attached. Access to MRC facilities can only be allowed with the 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. [office.miamirowing@gmail.com](mailto:office.miamirowing@gmail.com)
  2. Dues are on the 1 of the month. A late charge fee of \$25 applies for the unpaid balance as of the 8.
- The fee is for supervised coaching and does not include the 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:
  - 0 Requests for any changes in Coaching status must be made in writing to the MRC Office: [office.miamirowing@gmail.com](mailto:office.miamirowing@gmail.com) 30 days before the change takes effect.
  - 0 The Head Coach must approve changes.
- Freeze:
  - 0 You may freeze your Coaching for anticipated absences more significant than two months and less than one year. The admin fee to freeze is \$35.00. The request must be made in writing to the Finance/Administrator. The freeze will become effective on the 1 of the month following the written request.
- Cancellation:
  - 0 Submit notification of cancellation in writing to the office, to [office.miamirowing@gmail.com](mailto:office.miamirowing@gmail.com)

## MRC USE ONLY:

Date Application Received: \_\_\_\_\_ Method of payment: \_\_\_\_\_  
Date of Notification: \_\_\_\_\_ Assigned Membership No. \_\_\_\_\_

---

[www.miamirowing.org](http://www.miamirowing.org)

Location Address: 3601 Rickenbacker Cswy, Key Biscayne, Florida, 33149, phone 305-361-3225



# MIAMI ROWING CLUB

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

## Release of Liability

IN CONSIDERATION of being allowed to participate in any rowing activity, including scheduling, supervised club activities during the dates listed below, I, for myself, my 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 severe bodily injury, including permanent disability, paralysis, and death ("Risks"); (b.) these Risks and dangers may be caused by my 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. AGREE AND WARRANT that I will examine and inspect each Activity in which I participate as a participant in Miami Rowing Club programs and that, if I observe any condition that I consider unacceptably hazardous, I will notify the proper authority in charge of the Activity. I will only take part in the Activity once the situation has been corrected to my satisfaction.
4. At this moment, 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 Releases 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 Release 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, claims any of the Releases, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releases 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:

\_\_\_\_\_



# MIAMI ROWING CLUB

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

## 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. \_\_\_\_\_



# MIAMI ROWING CLUB

## CREDIT CARD AUTHORIZATION FORM

Date: \_\_\_\_\_

Rower/Company Name: \_\_\_\_\_

Credit card Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Credit Card: (Check one) Master Card \_\_\_\_\_ Visa \_\_\_\_\_ NO AMERICAN EXPRESS

Amount Authorized: \_\_\_\_\_ (one time authorization only)

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: \_\_\_\_\_

I authorize to add this credit card to my Account in Team Unify for payment of Membership Dues, Sponsorship, Donations and Fees (only if Applicable) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Signature indicates your authorization to charge your Credit Card . This information will be held in strict confidence.