



Haddon Township Crew Club

STUDENT MEMBERSHIP REGISTRATION FORM

The Haddon Township Crew Club is open to any student in grades 9 through 12 at Haddon Township High School. The Haddon Township Crew Club is an official board approved club of the Haddon Township High School. Haddon Township Crew Club, Inc. is a non-profit corporation endorsed by the Haddon Township Board of Education to administer the club activities.

Please read the attached information sheet for details on our Rowing Program.

Returning Rower _____ New Rower _____

Winter/Spring 2012 fees: \$700.00*

Payment plan:

Minimum payment of \$100. due at registration, 3 payments of \$200. due by Jan. 15, Feb. 15, and March 15.

*\$25. late fee applies unless prior arrangements have been made with Justine Stevens/club treasurer at 856-287-1979.

Please read and sign the attached Code of Conduct.

Please read and sign the 2 attached waivers and Medical release form.

Please provide the following information (please print neatly):

Name of Student: _____ Date: _____

Fall '11 Grade at Haddon Township High School: Fr So Jr Sr Birth Date: / /

If you are a returning rower please only fill in the following if you have made changes.

Student contact information:

Address: _____ Zip Code _____

Student's Cell Phone () - _____, Student Email: _____

Students should have their own email address for direct communication with the coach. A valid e-mail is vital for communication. Please list all e-mail addresses that should receive crew information.

Name of Parent(s)/Guardian(s): _____

Home Phone () - _____ - _____

Mother's Cell Phone () - _____ - _____ Father's Cell Phone () - _____ - _____

Mother's Email _____

Father's Email _____

Do you have any objection to photos (no names will be used) of you and/or your family members being displayed on our website HTCrewClub.org?

Yes _____ No _____

Do you have any objection to your rower's name and phone number being distributed to other rowers on the team?

Yes _____ No _____

To be completed by Membership Committee:				
2 Waivers Completed: _____	Code of Conduct Reviewed & Accepted: _____	Fee Paid: _____	Date: _____	Initials: _____
Medical Release and Treatment Consent _____				