

# **Comox Valley Canoe Racing Club**

## **Membership Form and Waiver 2018**

First name: \_\_\_\_\_

Surname: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Home Ph # \_\_\_\_\_ Cell Ph# \_\_\_\_\_

Email Address: \_\_\_\_\_

### **Waivers and Release of Liability**

I am aware of the risks involved in canoeing and kayaking, and agree not to hold the Comox Valley Canoe Racing Club or any of its officers or members responsible for any injury, property damage, or harm I or any member of my family may suffer while paddling or attending races, clinics, or other events or activities sponsored or sanctioned by the club. I will read and sign the waiver and directives on the reverse of this form.

### **Parent or guardian must sign for any paddler under 18 years of age.**

Membership Options:

- Individual (\$250/year)
- Family (\$350/year)
- Season (\$90/person/season)

Total: \_\_\_\_\_

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

Cash: \_\_\_\_\_ Cheque: # \_\_\_\_\_ e-transfer: \_\_\_\_\_

Receipt: # \_\_\_\_\_

CORA fee \$25 per calendar year. CORA fee can be paid online at

<https://www.canadianoutrigger.com/membership/become-a-member/>

**Comox Valley Canoe Racing Club PFD Directive**

If you cannot swim for 200 yards (183 metres) and tread water for 20 minutes, you are required to wear a PFD at all times when paddling in club canoes and during club activities.

**Comox Valley Canoe Racing Club Medical Condition Awareness Directive**

If you have any medical conditions that may be an issue while participating in club activities, you must list them here and make them known to the crew you are paddling with.

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**Cold Water Conditions and Club Safety Waiver:**

**Athletes over 18 years of age**

I am fully aware and understand the risks involved with paddling in cold water conditions. I understand that if I paddle without wearing a Government approved PFD, I do so at my own risk and I assume all responsibility for my actions. I understand that if I capsize while not wearing my PFD, my safety is compromised.

In any case, I agree to comply with all applicable Coast Guard Regulations and with the above Comox Valley Canoe Racing Club PFD and Medical Awareness directives.

I hereby release Comox Valley Canoe Racing Club, its coaching staff, volunteers, directors and all related persons, groups and associations, from any personal injury, property damage, expense and related loss, including loss of income that I or my next of kin may suffer as a result of my choice to not wear a PFD and to participate in club activities with medical conditions.

\_\_\_\_\_  
Date Athlete (printed name) Athlete signature

\_\_\_\_\_  
Date Witness (printed name) Witness signature

\_\_\_\_\_  
Date Parent or Guardian if under 18 years old.