



HNA Crew Fall 2016 Program Information

Dates: **Experienced Team:** Monday, August 29 – Thursday, November 10
Novice Team: Tuesday, September 6 — Thursday, November 10
Winter training begins Monday, November 21

Practices: Monday – Thursday, 3:15 – 6:15 p.m.; Friday, 3:15 – 5:15 p.m. (the novice team will begin at 3:30pm)

Fees: **\$250** for the season (see next page for payment options).
 Rowers who qualify to participate in regattas that require travel will have additional expenses for which financial assistance may be available. Requests for financial assistance must be made in writing to the HNA Business Office (folson@holynames-sea.org).

Location: Lake Union Crew, 2520 Westlake Avenue North, 98109.

Bus Routes: There are multiple Metro bus routes from HNA to the boathouse. For the first week, experienced rowers will accompany novices on the route.

Parking: There is ample free parking in front of the boathouse, as well as to the north and south. It is strongly recommended that vehicles **back into parking stalls** to increase visibility when pulling out; the area is highly utilized by bikers, runners, and pedestrians.

Parent Meeting: **Monday, August 29, at 7 p.m. at Holy Names Academy.** It is required that at least one parent of each student-athlete attend Sports Information Night (parent meeting) each year.

Fall Races: Mark your calendars! Tentative notations indicated events that depend on the size of the team and availability of boats and events. Please assume participation and stay tuned for updates.

<u>Date</u>	<u>Time</u>	<u>Event</u>	<u>Location</u>	<u>Participants</u>
Sunday, September 18	AM	Row for the Cure	Lake Union	Experienced Team
Sunday, October 2	AM	Tail of the Lake	Lake Union	All, hosted by HNA
Sunday, October 9	ALL DAY	Head of the Snohomish	Everett, WA	All (tentative)
*Sat.-Sun., October 22-23	ALL DAY	Head of the Charles	Boston, MA	Travel Team
Sunday, October 30	ALL DAY	Portland Fall Classic	Portland, OR	All
Saturday, November 5	ALL DAY	Frostbite Regatta	Green Lake	All
Sunday, November 6	AM	Head of the Lake	Lake Union	Experienced Team

**Additional fees for travel regattas will be communicated well in advance of departure.*

Eligibility: 100%-compliance on eligibility requirements below must be met before rowers will be cleared to participate fully in practices. (See next page, **To Register**).

TO REGISTER:

All athletes: Complete Steps 1–3

Novices and first-time crew athletes: Complete Steps 1–5 (including float test)

1. REGISTER with HNA Athletics online through FamilyID website

- Go to [Holy Names Academy Athletics page on FamilyID \(click here\)](#). Under *Programs*, click *2016 Fall Athletic Registration*. Under Sections, check *Crew*.
- Complete all registration information. NOTE: If you have previously registered for any HNA Athletics program on FamilyID, you only need to update with any changes (e.g., new contact information, different physician, new health concerns, etc.)
- Complete the three online Agreements: Athletic Handbook Acknowledgement, Concussion/Head Injury Information Acknowledgement, Parental Permission for Athletic Participation & Emergency Medical Treatment.

2. SUBMIT a completed [WIAA Pre-Participation Physical Evaluation & History Form \(click here\)](#) and print)

- Submit the printed form to the HNA Athletic Office. The form must be signed by a Washington-licensed physician.
- A new form must be on file with the Athletic Office each year the student intends to participate on any HNA athletic team(s).

3. SUBMIT Crew Program Fee (\$250)

The \$250 fee for fall crew can be paid either:

- Via check (payable to HNA Crew and mailed to Holy Names Academy, attention Caitlin McClain, 728–21st Avenue East, Seattle, WA 98112).
- Online (via PayPal) when you register with [HNA Athletics on the FamilyID website](#) (see #1 above). After choosing the program *2015 Fall Athletic Registration*, follow the steps provided for online payment.

STEPS 4 & 5 ARE REQUIRED ONLY OF ATHLETES WHO DID NOT PARTICIPATE IN HNA CREW 2015-2016:

4. PRINT and complete another [USRowing Waiver of Liability](#) (print the next page).

- Submit the signed form to HNA Crew coaches.

5. PRINT and complete the [HNA Crew Float-Test Form](#) (print the last page)

Required only for novices and first-time athletes.

- The form must be signed by a Certified Water Safety Instructor.
- Submit the signed form to HNA Crew Coaches.

Release of Liability



IN CONSIDERATION of being given the opportunity to participate in any USRowing activity, including scheduled, supervised club activities, and registered regattas, during the policy term 12/31/15 – 12/31/16, I, for myself, my personal representatives, assigns, heirs, and next of kin.

1. I 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. I 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 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. I AGREE AND WARRANT that I will examine and inspect each Activity in which I take part as a member of USRowing 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. I HEREBY RELEASE, discharge, and covenant not to sue USRowing, the Club, the Regatta, their administrators, directors, agents, officers, volunteers and employees, other participating regatta organizers, any sponsors, advertisers, 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.

PLEASE DO NOT CHANGE OR ALTER THE WORDING ON THIS WAIVER WITHOUT PRIOR APPROVAL FROM USROWING

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:

USRowing # _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Date: _____

Participant’s _____ Signature: _____

Organization: _____

PARENTAL CONSENT

(if participant is under the age of 18).

AND I, the minor’s parent and/or legal guardian, understand the nature of rowing activities and the minor’s experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby release, discharge, covenant not to sue, and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses, or damages on the minor’s account caused or alleged to be caused in whole or part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor’s behalf makes a claim against any of the above Releasee, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss, liability, damage, or cost any may incur as the result of any such claim, to the fullest extent permitted by law.

Printed Name of Parent/Guardian:

Address: _____

City _____ State _____ Zip _____

Phone: _____ Date: _____

Parent/Guardian Signature (only if participant is under the age of 18):

This is THE USRowing Release of Liability, which should be copied for your use.

Holy Names Academy Crew Float-Test Form

PRINT THIS PAGE

All HNA rowers and coxswains are required to take a float test in order to verify that they are able to float and/or swim for at least 10 minutes. Print this page and take the float test form (below) to a public or private pool where a **Certified Water Safety Instructor** can conduct the test.

Holy Names Academy must have an **ORIGINAL COPY** of the float-test form. If you have participated in the Lake Union Crew/Holy Names Academy summer camps in the past three years, you may not have to re-take the test as long as we can locate your form.

You are exempt from taking the float test:

- If you are a **CURRENT** Lifeguard or Water Safety Instructor (WSI); submit a copy of your card.
- If you have a current Scuba Certification Card or equivalent; submit a copy of your card.
- If you have a swim/float test on file with another club, you may submit an original copy of that test.

Procedure

In deep water, while wearing long pants and a long sleeve shirt, you must float, tread water, or swim in place for 10 minutes. In the final minute of the test, you must put on a life vest while continuing to tread water. A 10-minute float test is valid for three years.

Swimming Pool / Beach / Office Use Only

Participant: _____
First Name Last Name

Address: _____
Street

City State ZIP

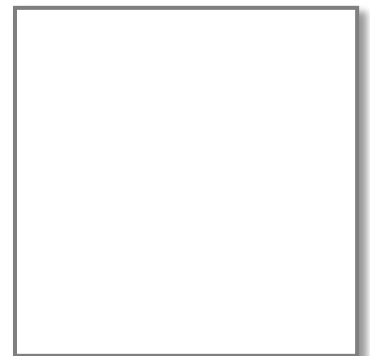
Lifeguard: _____
First Name Last Name

Participant Identification Verified? _____
(Lifeguard Initials)

*The above individual has successfully passed a float test as required for participation in **Holy Names Academy Crew programs**.*

Lifeguard Signature: _____

Date: _____



**Pool/Beach
Validation Stamp**