



## Parent Permission & Swimming Waiver

My child, \_\_\_\_\_, has my permission to participate in the activities of **Fairport Crew Club, Inc. (FCC)**.

I understand that the **FCC** does not carry health insurance and I am responsible for any/all health incurred costs. I also grant the coach/chaperone in attendance full authority to take whatever action they deem necessary regarding my child's health and safety, and I fully release the FCC from any liability in connection with those decisions. In the event that I cannot be reached in an **EMERGENCY**, I hereby give permission to the physician selected by the coach/chaperone in attendance to hospitalize and to secure treatment for my child. My child named above has permission and physician clearance to engage in all rowing events.

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Insurance Company Phone: \_\_\_\_\_

I hereby, for myself and for my family, my heirs, executors and administrators, waive and release any and all rights and claims against **FCC** or their respective agents, for any and all injuries which may be suffered by my child in connection with his/her participation in any of the activities, or the use of facilities and/or equipment utilized by **FCC**. This form is required to be signed yearly as a reminder to the rowers and parents, the waiver granted does not expire until rescinded in writing to the Registrar of the Fairport Crew Club.

### Swimming Waiver

My child, \_\_\_\_\_, can swim 250 meters while clothed and can tread water for at least 10 minutes.

I, \_\_\_\_\_ (Parent/Guardian), agree to and understand all of the above:

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

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