



MIAMI ROWING & WATERSPORTS CENTER, INC. 5 page 2011 Membership Application For:

FAMILY MEMBERSHIP: Initiation Fee: \$500 Monthly Dues: \$75

Family memberships include no more than two adults per household and their unmarried rowing children under the age of 21 (or currently enrolled in school up to age 23). This membership category allows the use of the Center and its facilities by the member's spouse/partner and unmarried children under age 21 (or currently enrolled in school up to age 23). Family Members are allowed one vote per membership (i.e. household).

INDIVIDUAL MEMBER (27 and over): Initiation Fee: \$250 Monthly Dues: \$75

A single person age 27 or older who has paid the appropriate initiation fee and annual dues. The Individual member has voting rights.

INDIVIDUAL MEMBER (under 27): Initiation Fee: \$125 Monthly Dues: \$50

A single person from age 18 to 26 who has paid the appropriate initiation fee and annual dues. The Individual member has voting rights.

SUMMER MEMBERSHIP: \$250

A special, one-time membership provided for rowing students home from school for the summer who wish to continue training. This membership is for no more or less than three months. Applicable for three months between June and September only.

BOAT SUPPORT SYSTEM FEE (private boat accommodations): \$300 per seat (subject to space availability)

All membership fees are inclusive of the mandated 12% fee required by the City of Miami.

****Required information to complete application.***

*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 school: _____

EMPLOYER: _____ PHONE: (_____) _____

*DATE OF BIRTH: _____ PLACE OF BIRTH: _____ CITIZENSHIP: _____

*GENDER: Male Female *MARITAL STATUS: Single Married

*SPOUSE'S NAME: _____

*CHILDREN:

Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____

ARE ANY OF YOUR RELATIVES MEMBERS OF MRC? IF SO, PLEASE LIST: _____

HOW DID YOU HEAR ABOUT MRC? _____

HOW DO YOU PLAN TO USE THE FACILITIES:

Competitive Rowing Recreational Rowing Kayaking Other: _____

*SIGNATURE OF APPLICANT: _____ Date: _____

MEMBERSHIP REQUIREMENTS:

All Membership Applications must be accompanied with signed copies of the Liability Waiver and Swim Sign-off attached. Access to MRC facilities cannot be allowed without 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 to treasurer@miamirowing.org.
 2. You may choose to pay dues annually, bi-annually or monthly.
- Payment amount must include:
 - The appropriate initiation fee.
 - The first month's dues.
 - Private boat accommodations if a space has been confirmed. Pro-rated if necessary.
- Membership status requires payment of dues regardless of non-use of the club by the member.
- Membership will be effective after receipt of payment and billing information and notification of acceptance by the Membership Committee.

BILLING PROCEDURES:

- The Miami Rowing Club does not send invoices or statements.
- Your account will be debited monthly, bi-annually or annually against your credit card or bank account.

MEMBERSHIP CHANGES AND CANCELLATION:

- Changes:
 - Requests for any changes in membership status must be made in writing to the MRC Office Administrator or emailed to info@miamirowing.org, 30 days prior to the change taking effect.
 - Changes must be approved by the Membership Committee.
- Cancellation:
 - Submit notification of cancellation in writing to the MRC Office Administrator or emailed to info@miamirowing.org, 30 days prior to termination.
 - Members leaving the club in good standing enjoy MRC Alumni status and may rejoin at a later date for half of the current initiation fee. Application for alumni status must be made in writing.

MRC USE ONLY:

Date Application Received: _____ Method of payment: _____

Date of Notification: _____ Assigned Membership No. _____



MIAMI ROWING & WATERSPORTS CENTER

3601 Rickenbacker Causeway, Virginia Key, FL 33149 www.miamirowing.org

Release of Liability

IN CONSIDERATION of being given the opportunity to participate in any rowing activity, including scheduled, supervised club activities, during the dates listed below, I, for myself, my personal 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 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 Releasee 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 take part as a participant in Miami Rowing Club programs 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. HEREBY 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 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.

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:



**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 AND WATERSPORTS CENTER, INC.

MIAMI ROWING CLUB

CREDIT CARD AUTHORIZATION FORM

Rower's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Credit Card: (Check one) Amex _____ Master Card _____ Visa _____

Name on Card: _____

Credit Card Number: _____

Expiration Date: _____ Authorization Number: _____

(4 numbers on front or 3 on the back)

Billing Preference for club dues (check one): ___annually ___bi-annually ___monthly

E-mail address: _____

Contact Telephone Number: _____

Signature: _____

Submission of this form is required. This information will be held in strict confidence.
Credit Card information may be emailed directly to treasurer@miamirowing.org

Mailing address: 3109 Grand Avenue, Suite 332 ▪ Miami, Florida 33133

www.miamirowing.org