

MOHAWK CANOE CLUB --- 2017 River Training Application

June 17 , 18, and June 24, 25

Application Deadline:

May 31, 2017



This is a 4-day sequence of instruction for canoes and kayaks designed to progress students from their current skill level to the next level.

Class size will be limited. Participation will be determined, in part, by the majority of boat types submitted and the similarity of skill level.

The River Training Program is designed for adult learners. The course is appropriate for some children (accompanied by their parents/guardians). Please consult with the Training Chairman regarding the appropriateness of this course for your child.

Mohawk Canoe Club --- 2017 River Training Application

Name: _____ Age: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: ____/____-____ Cell: ____/____-____ E-mail: _____

Emergency Contact: _____ Phone: ____/____-____

Participants must be able to swim, must wear a PFD and provide their own boats, personal gear, lunches, and non-alcoholic beverages. Canoeists require kneeling pads, and, in Class II water, helmets. Kayakers require spray skirts and helmets. Appropriate boat flotation is required (call Training Chairman for questions).

There is heavy emphasis on self-rescue and the rescue of paddling companions. To this end, participants will spend significant time IN the water.

The program venues are subject to change based on participant progress, river levels, weather, etc. The start time each day is 9:00 a.m. We are usually off the water by 4 p.m. but participants should plan additional time to load their boats and gear and run the end of the day shuttle.

The first day please meet at 9:00 a.m., NJ Washington Crossing State Park - waterfront parking lot.

For questions, please contact Training Chairman Ken Heaphy at 908-526-4626 or email at kheaphy105@aol.com.

We make every attempt to conduct the classes as scheduled. However, unsafe water levels, bad weather, etc. may force us to reschedule certain dates, or adjust the venue. This course is a progression in skill level over the four days: maximum benefit is gained from attendance on all four days.

Application Deadline May 31 – send:

- 1) Completed application bottom
- 2) Check for \$75/person (payable to Mohawk Canoe Club)
- 3) Mohawk Guest Insurance Waiver

to: Mohawk River Training, 103 Avonridge Road, Raritan, NJ 08869

A. What boat will you be using -

Kayak:

- recreational
- touring/sea
- whitewater/play
- sit upon

Canoe:

- solo
- tandem

B. Boat manufacturer: _____

Model / name: _____

Length: _____

C. Current skill with boat you will be using:

- novice
- been out few times
- intermediate
- advanced

D. Primary paddling interest:

- lakes / reservoirs
- quiet rivers
- class I rivers
- class II rivers

E. Your learning preference for this training:

- I'm apprehensive, take it slow and easy
- laid back, no stress; this should be fun
- learn enough in fast paced manner
- I want to be challenged / pushed

F. Any special needs or considerations:

G. Your goals for this training: _____

ALL APPLICANTS MUST INCLUDE THE ATTACHED MOHAWK GUEST INSURANCE WAIVER



MOHAWK CANOE CLUB

2017

AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY

READ BEFORE SIGNING.

Name of Club: Mohawk Canoe Club **COVERAGE TERM: 02/12/2017 – 2/11/2018**

In consideration of being allowed to participate in any way in this sports activity, related events and activities, the undersigned acknowledges, appreciates, and agrees that: The risk of injury from the activities involved in this sport is significant, including the potential for permanent paralysis and death; and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others and assume full responsibility for my participation; and, I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such hazard to the attention of the nearest official immediately; and, I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the PADDLESPORT RISK MANAGEMENT, LLC; Mohawk Canoe Club; their officers & directors, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, volunteers, coaches, steerers, and, if applicable, owners and lessors of premises used to conduct the event (“RELEASEES”) WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. I also acknowledge that photographs and video may be taken of me in my participation in, and attendance at this event, and hereby freely agree to allow without restriction all uses of such photos and videos in the reporting of this race, and/or in the promotion of this event, its location, other sporting events, sport in general, and/or related purposes. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

(Participant/Member Name: PLEASE PRINT) Address: _____

Signature: _____ Phone: _____ Date: _____

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION) This is to certify that I, as parent/legal guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above, of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child’s involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law. I further agree to the photographic and video release set forth above.

Parent/Legal Guardian Name and Address (PLEASE PRINT) _____
Address: _____ Emergency Contact # _____

Signature of Parent/Legal Guardian: _____ Date: _____