

Heritage Coast Sailing and Rowing Incorporated
(a not-profit Corporation)
2018 Individual Membership Enrollment
Please Print

Name: _____

Address: _____

City, State, Zip: _____

E-mail Address: _____

Home Phone: _____ Cell Phone: _____

18 or more years old: yes ___ No ___; Male ___ Female ___.

I have read the current Heritage Coast Sailing and Rowing Policy & Safety Rules or accept the obligations established there in, without reading them. . A copy is found on the website: www.heritage-23.org.

I am able to swim. Yes ___ or No ___ (if No, a life vest must be worn when onboard a HCS&R vessel.)

Individual Membership: \$25.00/year

Choose one: Row, ___; Sail, ___; boat building, ___ or other.

I have read the waivers and photo releases attached and which are included as part of this agreement, and I fully understand their terms. I understand that I have given up substantial rights by signing this form and have signed this 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.

Applicant Signature _____ Date _____

Parent/Guardian of rowers, sailors and/or builders under the age of 18

If rower/sailor/builder is under the age of 18, a parent or legal guardian must also sign the HCS&R consent to release below agreeing to the following statement:

This is to certify that as parent/guardian of this participant, I do consent to his/her release of liability as set forth with this application and agree to the waivers below.

Parent/Guardian Signature _____ Date _____