



---

## Swim Test

In accordance with the US Rowing safety guidelines, all RowHouse rowers must pass a swim test. No rower will be allowed on the water in RowHouse boats unless they have been previously tested. All new rowers must have completed the simple swim test and submitted the signed form. Once completed, the form will remain on file for 4 years.

Rowers should be able to:

1. Swim freestyle for 50 yards non-stop.
2. Tread water for 5 minutes.
3. At the end of the 5 minutes, without a break, put on a lifejacket.

I certify that \_\_\_\_\_ has completed the above requirements and passed a swim test for the rowing program.

Certified By: \_\_\_\_\_

Signed: \_\_\_\_\_



Parents and / or Legal Guardians

Father's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Work: \_\_\_\_\_

Father's E-Mail: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Street Address: (Indicate if same as above) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Work: \_\_\_\_\_

Mother's E-Mail: \_\_\_\_\_



### Medical Consent Authorization

Check with a physician before beginning the rowing program. Please attach a copy of your insurance information to this form.

Rower's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Medical Provider Information:**

Insurance Provider: \_\_\_\_\_ Policy# \_\_\_\_\_

Physician: \_\_\_\_\_ Physician's Phone: \_\_\_\_\_

Physician's Address: \_\_\_\_\_

**In case of an Emergency, Contact:**

Name	Phone	Relationship

**Known Medical Problems and Medications:** *This information is included to provide information to emergency personnel of medical problems and medications in an emergency situation.*

Existing Medical Problem (Example: Asthma)	Medication Taken (Example: Combivent)	Dosage Taken (Example: 2 puffs)	Dosage Frequency (Example: "Twice Daily")
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Medical Consent Authorization:**

In the event of an injury, accident, illness or other emergency, and if the above stated physician cannot be reached, I authorize my child to be treated by certified emergency personnel such as emergency medical technicians, emergency room physicians and other emergency room personnel such as nurses and laboratory technicians. I agree to accept financial responsibility for the costs related to this medical treatment.

---

Name & Signature of Authorized Parent or Guardian \_\_\_\_\_ Phone \_\_\_\_\_ Date Signed \_\_\_\_\_



**RowHouse Waiver**

IN CONSIDERATION of being given the opportunity to participate in any (“Club”) activities (“Activity”) until the end of this 2020-2021 year, I, for myself, my personal representatives, assigns, heirs, and next of kin: 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.

1. 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 Releases names 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.
2. AGREE AND WARRANT that I will examine and inspect each Activity in which I take part as a member of the Club 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.
3. HEREBY RELEASE, discharge, and covenant not to sue USRowing, the Miami International Rowhouse, 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 on of the Releases herein) from all liability, claims, demands, losses or damages on my account caused or allege to be caused in whole or in part by the negligence of the Releases 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 Releases, I WILL INDEMNIFY SAVE AND HOLD HARMLESS each of the Releases, from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as a result of such claim.

I have read this agreement, fully understand its terms, understand that 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 the 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:** \_\_\_\_\_

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

**Signature (only if age 18 or over:** \_\_\_\_\_

**PARENTAL CONSENT** 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 Releases 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 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 Releases, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS each of the Releases from any litigation expenses, attorney fees, loss liability, damage, or cost any may incur as the result of any such claim.

**Printed Name of Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_



## Protocol for the Return to Rowing

PHASE 1	GUIDELINES (June 17, 2020)
<p>Miami RowHouse "Open Air" Summer Rowing</p>	<p><b>Key Principles:</b></p> <ol style="list-style-type: none"> <li>1. Follow state and local rules and regulations.</li> <li>2. Training will focus on "get in, train, get out" approach as recommended by US Rowing (<i>No parents or other family members or friends are allowed on the premises. Only rowers.</i>)</li> <li>3. Individuals should maintain social distancing in the boat area.</li> <li>4. MASKS MUST BE WORN BY ALL (JUNIORS AND MASTERS etc.) inside the RowHouse building.</li> <li>5. NO ERGING BY ANYONE INSIDE THE ROWHOUSE BUILDING. If you need to erg please take the erg outside on the porch and put it back in the house when done. Please be sure to sanitize the erg handles and seat BEFORE you use it and AFTER you have put it back inside the RowHouse.</li> <li>6. ONLY USE MATS OUTSIDE and be sure to wipe down before and after use and bring your own rollers if you use them with stretching.</li> <li>7. Training will be on the water and focused on the use of singles and doubles.</li> <li>8. <i>Parents and rowers and Masters should report to Coach immediately by phone/text and email if the parent or rower or Master comes in contact with anyone who has COVID-19 including but not limited to family, friends etc. Do not come to the club if exposed to COVID-19 or if you are not feeling well.</i></li> </ol>
	<p><b>Additional General Guidelines</b></p> <ul style="list-style-type: none"> <li>• Masks should be worn at all times while off the water. The masks can be removed in the boat and then put back on as the rower returns to the dock.</li> <li>• All athletes and coach should sanitize or wash their hands with soap for at least 20 seconds upon arrival and should follow hand-washing protocols regularly.</li> </ul>

	<ul style="list-style-type: none"> <li>• Athletes should have small containers of hand sanitizer with them to use as needed after touching any hoses, water spigots, doorknobs etc.</li> <li>• Athletes should bring with them a water bottle/s as needed and wear what they plan to wear to row. NO SHARING OF WATER BOTTLES.</li> <li>• Athletes should leave any bags or personal belongings not being worn in their cars.</li> <li>• The RowHouse building is closed to athletes under Phase 1. All activities will take place in the open air on the property.</li> <li>• If an Athlete needs to use the first bathroom in RowHouse, they need to first get permission from the Coach and follow required protocol from the Coach. Only one person is allowed to enter to use the bathroom at a time.</li> </ul>
--	---

	<p><b>Return to Training/Health Monitoring</b></p> <ul style="list-style-type: none"> <li>• Any Athlete known to have been exposed to COVID-19 must self-report to the Coach.</li> <li>• <i>Each Athlete needs to take their temperature daily prior to arrival at the boathouse.</i> Do not come to the boathouse if your temperature is 100.4 degrees or over.</li> <li>• If the Athlete feels sick they should contact the Coach and not attend practice.</li> <li>• If any Athlete does get COVID-19 they need to provide the Coach with a note from their doctor indicating they are ok before returning to the boathouse.</li> </ul>
--	--

	<p><b>Outdoor Facility Use</b></p> <ul style="list-style-type: none"> <li>• The boats are stored in an outdoor open facility.</li> <li>• All club oars and boats should be wiped down before and after use with soap and water.</li> <li>• When launching /landing, social distancing requirements should be maintained. Only one boat at a time to launch and return to the dock. Keep social distancing as you wait your turn.</li> </ul>
--	---

I have read and agree to the protocol described above. Date: \_\_\_\_\_

\_\_\_\_\_  
Junior Name

\_\_\_\_\_  
Parent Name or Masters Name

\_\_\_\_\_  
Junior Signature

\_\_\_\_\_  
Parent Signature or Masters Signature



## COVID-19 Liability Waiver

I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC and many other public health authorities still recommend practicing social distancing.

I further acknowledge that Miami International RowHouse has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19.

I further acknowledge that Miami International RowHouse cannot guarantee that I will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and/or others, including, but not limited to, club staff, and other club rowers and their families.

I voluntarily come to use the facilities at Miami International RowHouse and acknowledge that I am increasing my risk to exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread while being at Miami International RowHouse.

I attest that while at Miami International RowHouse or before I go there:

- \* I am not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.
- \* I have not traveled internationally within the last 14 days.
- \* I have not traveled to a highly impacted area within the United States of America in the last 14 days.
- \* I do not believe I have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.
- \* I have not been diagnosed with Coronavirus/Covid-19 by state or local public health authorities and am not waiting for COVID-19 test results.
- \* I am following all CDC recommended guidelines as much as possible and limiting my exposure to the Coronavirus/COVID-19.

I hereby release and agree to hold Miami International RowHouse harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of Miami International RowHouse, or that may otherwise arise in any way in connection with any services received from Miami International RowHouse. I understand that this release discharges Miami International RowHouse from any liability or claim that I, my heirs, or any personal representatives may have against the club with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from Miami International RowHouse. This liability waiver and release extends to the club together with all owners, partners, coaches, Board of Directors and employees.

\_\_\_\_\_  
Signature \_\_\_\_\_ Date  
Masters Rower or Parent/ Guardian of Juniors Rower  
\_\_\_\_\_  
Printed Name \_\_\_\_\_ Junior Rower Signature