



# WOMEN'S ON-THE-WATER ROWING LEARN TO ROW



Wednesday, April 4 – Wednesday, May 30, 2018

These classes are for women who have no prior experience and want to learn to row in a fun and supportive environment. All classes will be held on the North Shore Channel of the Chicago River. Meet at the Damrich Rowing Center (DRC), located at 3220 Oakton (at McCormick) in Skokie. Wear tighter-fitting shorts (biker-style) and a t-shirt and bring a water bottle. Please arrive 15 minutes early to warm up/stretch prior to class. Minimum of 4. No discounts; students should plan to attend all classes. All participants are expected to know how to swim. You will receive an e-mail confirmation once enrolled.

<b>181-605</b>	Wednesdays, DRC, 9-11 am (April 4, 11, 18, 25, May 2, 9, 16, 23, 30)	\$360 =	\$ _____
<b>181-606</b>	Fridays, DRC, 9-11 am (April 13, 20, 27, May 4, 18)	\$200 =	\$ _____
	<b>Total =</b>		\$ _____

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

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

e-mail address \_\_\_\_\_

MAIL with check or credit card information to: NTX, 7 Happ Rd., Northfield, IL 60093 OR FAX with credit card information to: (847) 446-6614. **Register Online at [www.newtrierextension.org](http://www.newtrierextension.org) VISA/MasterCard/Discover (no American Express):**

Card # \_ \_ \_ \_ - \_ \_ \_ \_ - \_ \_ \_ \_ Exp. Date \_ \_ / \_ \_

<p><b>WAIVER</b> I agree on my behalf, and if applicable my child/ward's behalf, to the waiver, hold harmless, and indemnification terms and all other terms included on reverse side of this registration form.</p> <p><b>Signature</b> _____ (Adult signature required to process registration)</p>
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Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

**New Trier Extension Waiver, Hold Harmless, and Indemnification Terms**

I recognize and acknowledge that there are certain risks of physical injury to participants in the course or courses identified on page 1 of this registration form (the "Course"), and I voluntarily agree to assume the full risk of any and all injuries, damages, or loss, regardless of severity, that I or my minor child/ward sustain as a result of participation.

I release and discharge New Trier Township High School District No. 203, the New Trier Extension Program, including the Board of Education, its members, employees, agents, and volunteers ("New Trier High School") from any and all claims from injuries, including death, damages, or losses which I or my child/ward may have or which may accrue on account of participation in the Course.

I further agree to indemnify, hold harmless, and defend New Trier High School from any and all claims resulting from injuries, including death, damages, and losses that I or my child/ward sustain arising out of, connected with, or in any way associated with the activities of the Course.

It is my express intent that this waiver and release shall bind the members of my family, spouse, heirs, assigns, and personal representatives and shall be deemed as a release, waiver, discharge, and covenant not to sue New Trier High School.

In the event of an emergency, I authorize New Trier High School to secure from any licensed hospital, physician, and/or medical personnel any treatment deemed necessary for my or my child/ward's immediate care and agree that I or my child/ward's will be responsible for payment of any and all medical services rendered.

I have read and understand the registration form, including the warning of risk, assumption of risk and waiver and release of all claims.

If any term, covenant, condition, or provision of this registration form is held by a court of competent jurisdiction to be invalid, void, or unenforceable, the remainder of the provisions shall remain in full force and effect and shall in no way be affected, impaired, or invalidated.