

**Spackenkill Rowing Club Membership Form**  
**Rower Information** (please fill out legibly and completely)

Rower's Name: \_\_\_\_\_

Rower's Address: \_\_\_\_\_

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

Rower's Home Phone: \_\_\_\_\_ Rower's Cell: \_\_\_\_\_

Rower's Email: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Birth Date: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_\_\_ Gender: M or F

Have you rowed before?: \_\_\_\_\_ If Yes, What position? Port\_\_\_ Starboard\_\_\_ Coxswain\_\_\_

What other sports do you participate in?  
\_\_\_\_\_

**Parent/Guardian Information** (please fill out legibly and completely)

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

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

City, State, Zip: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

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

Father's Cell #: \_\_\_\_\_ Mother's Cell #: \_\_\_\_\_

Father's Work #: \_\_\_\_\_ Mother's Work#: \_\_\_\_\_

Father's Email: \_\_\_\_\_

Mother's Email: \_\_\_\_\_

I give S.R.C. permission to use my child's picture in newspaper articles and on the S.R.C. web page.

\_\_\_\_\_

**Responsible Parent/Guardian Signature**

**2017 Season Dues:**

7th Grade or 2nd Rower - \$250.00      8-12th Grade - \$550.00

Please make checks payable to Spackenkill Rowing Club

and return this completed form to

Joe Gagliardi

Must be paid in full by March 6th of Rowing Season