



Making boating accessible and fun for all!

SUMMER BOATING CAMP

Recommended Equipment List for Daily Programs:

Equipment needed daily:

Life Jacket (one will be provided if you do not have one)

1. Must be USCG approved
2. Must be proper fitting for the intended wearer
3. Must be in Good and Serviceable Condition

SUNSCREEN

WATER Bottle...plastic.... With YOUR NAME on it.

Hat – Sunglasses with strap to keep around the neck (straps for prescription glasses too)
(Rule #1 – the more expensive the glasses the faster they sink?)

Boat/Water Shoes (no sandals or open toes, no black soles)

Shorts and T-shirts over bathing suits
(if students wish bathing suits should be appropriate for activities)

Warmer clothing to layer over shorts and T-s if weather is cooler, or predicted to cool

Towels

Extra pair of dry clothing and shoes
(Remember that clothing and shoes will probably not be in the cleanest environment
Wear the old stuff!)

Lunch and Drinks. There will be a way to refill water bottles.

Please mark all of your personal belongings with permanent marker and take them with you when you leave. We will not be responsible for items left in the program environments or dock boxes.

Questions: info@annapolisboating.org



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ANNAPOLIS COMMUNITY BOATING, INC.

STUDENT INFORMATION

Name _____ Birth Date _____

Mailing Address _____

Street Address (if different)

Home telephone _____ e-mail _____

Cell phone _____

Boating experience _____

Parent Information

(1) Name _____ (2) Name _____

Phone: Home _____
Work _____
Cell _____

Home _____
Work _____
Cell _____

Email: Home _____
Work _____

Home _____
Work _____

Parent Signature _____ Date _____

Class: _____ Date: _____ Session: _____ Cost: _____

Class: _____ Date: _____ Session: _____ Cost: _____

Please mail forms with \$75 deposit to:

Annapolis Community Boating, Inc
P.O. Box 4367
Annapolis, MD 21403

Phone: 410-703-8248

Balance due May 15, 2012

Rev: 2 FEB 2012



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ANNAPOLIS COMMUNITY BOATING, INC

AUTHORIZATION TO CONSENT TO TREATMENT OF MINOR

I, the undersigned parent or guardian of _____, a minor, does hereby consent to any emergency X-Ray, medical, or surgical treatment or hospital care which is deemed appropriate by, and is to be rendered under the general or special supervision of any physician or surgeon licensed under the provisions of the Medical Practice Act.

It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required, but is given to provide authority and power on the part of the aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his best judgment may deem advisable, and neither said agents or organizations involved assumes any financial responsibility for exercising this action.

This authorization is given pursuant to the provisions of the applicable Civil Code for the State of Maryland.

Family Doctor: _____ Phone _____

Persons to contact in emergency:

- 1. _____ Phone _____
- 2. _____ Phone _____

Existing medical or learning problems:

Known Allergies (e.g. bee stings): _____

Immunization Record:

- 1. Was student enrolled in a Maryland school, public or private, within the past year?
 YES, provide name of Maryland school: _____
 NO, provide a copy of immunizations confirming that the child has received all immunizations as required by the MD DHMH recommended Childhood Immunization Schedule. See www.edcp.org (immunization) for information.
- 2. Is student exempt from any immunization on medical or religious grounds?
 YES, provide a signed copy of MD DHMH Immunization Certificate from either a licensed physician indicating the the immunization is medically contraindicated, or the parent or guardian indicating that they object to immunizations for religious reasons.
 NO

Date of last Tetanus shot: _____

Health Insurance Policy Holder: _____

Social security number: _____

Plan and group number: _____

This authorization shall remain effective until revoked in writing.

Signature (parent or legal guardian) _____

Address: _____

City: _____ State: _____ Zip: _____

Mother's Phone (H) _____ (W) _____ (cell) _____

Father's Phone (H) _____ (W) _____ (cell) _____



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ANNAPOLIS COMMUNITY BOATING, INC

CODE OF CONDUCT

Please read the following provisions carefully. Both the student and a parent or guardian are required to sign below.

To achieve its goals of training students in the skills of boating, Annapolis Community Boating, Inc. requires all students to follow these rules.

GENERAL SAFETY

1. A Coast Guard approved Life Jacket must be worn properly secured at all times when in boats and other times as directed.
2. Students should wear clothing appropriate for prevailing weather conditions. Suitable footwear must be worn at all times. Open-toed footwear is not acceptable.
3. No glass containers are allowed anywhere on the grounds or in the boats.

BEHAVIOR:

1. Sportsmanlike conduct is expected of students at all times, on and off the water. Foul language, disruptive behavior, or disrespectful comments or gestures will not be tolerated. Failure to comply may result in disciplinary action enforced by the coaches and committee volunteers.
2. No running, pushing, or unauthorized swimming is permitted.
3. Students will return boats and equipment to proper storage areas as soon as possible upon completion of the day's activities. All personal gear and items will be properly secured and the dock and ramp areas will be kept clean, neat and free from obstructions.
4. Students will return boats and equipment to proper storage areas as soon as possible upon completion of the day's activities. All personal gear and items will be properly secured and the beach area will be kept clean, neat and free from obstructions.
5. Student will not tamper with, use or borrow equipment or other items that do not belong to them. Unauthorized use of another's property constitutes theft.
6. Use of alcohol, drugs and other banned substances is strictly forbidden.

STUDENT AGREEMENT:

I understand that in joining Annapolis Community Boating, Inc's Spirit of America Program, I agree to obey all program rules as set forth by the program staff, that I will use utmost care in the use of boats and equipment, and that I will not engage in any horseplay or disruptive behavior. I understand that failure to attend regularly, arrive promptly, and abide by the rules of this Code of conduct may result in my suspension or expulsion from the program

Student Signature _____ Date _____

GUARDIAN'S AGREEMENT:

I/We understand the contents of this statement and agree to see to it that our child adheres to the program rules. I/We agree to assume the obligation for the expenses of repair and/or replacement of club/program equipment that is attributable to my child's reckless or irresponsible behavior. I/We agree to make an appointment for a parent-instructor conference, if requested.

Parent/Guardian Signature _____ Date _____

Parent/Guardian Signature _____ Date _____



Parents Consent
And
Waiver of Liability – Assumption of Risk – Indemnity
Agreement

We, the undersigned parents or legal guardians (hereafter referred to in the singular) of _____ (herein referred to as the “child”), request that the child be allowed to participate in the Annapolis Community Boating, Inc, Spirit of America Program (herein referred to as “the activities”).

This agreement shall remain in effect until Annapolis Community Boating, Inc receives written notice of the cancellation of the consent, or until the end of the activities described above.

In return for the child being permitted to take part in the activities and to use the facilities and property of Annapolis Community Boating, Inc and Epping Forest, each of us makes the following promises and warrants the truth of the following facts:

- 1. I am familiar with the programs included in the activities, and I understand officers of Annapolis Community Boating, Inc are available to discuss the activities if I should wish additional information.
2. My child is in good health, and I know of no reason why he/she would be incapable of participating in the activities.
3. WAIVER OF LIABILITY: I waive and release any right or claim whatsoever which. I, my heirs, distributes, guardians, legal representatives and assigns may have or acquire to make a claim against, sue, attach the property of, or prosecute Annapolis Community Boating, Inc or Spirit of America Foundation or any of its members, governors, trustees, officers, agents, instructors, and affiliated organization (herein referred to as “the releases”) for monetary damages caused by injury to my child or damage to the property of my child or myself arising from my child’s participation in the activities and use of the facilities and property of Annapolis Community Boating, whether or not the injury or damage results from the negligence or other action, except intentional acts, of any of the releases.
4. ASSUMPTION OF RISK: I am aware that the activities may involve maneuvering a boat, sailboard or other watercraft on deep waters in potentially hazardous conditions which may include, among other things, strong winds and high waves, sudden and unexpected immersion in deep waters and collision with other watercraft or stationary objects such as docks, piling, and buoys. With knowledge of the dangers involved, I voluntarily ask that my child be allowed to take part in the activities. I ACCEPT ANY AND ALL RISKS TO MYSELF AND MY CHILD OF INJURY, DEATH, AND PROPERTY DAMAGE ARISING FROM PARTICIPATION IN THE ACTIVITES AND THE USE OF THE FACILITIES AND PROPERTY OF THE ANNAPOLIS COMMUNITY BOATING, INC, WHETHER OR NOT CAUSED BY THE NEGLIGENCE OR OTHER ACTION, EXCEPT INTENTIONAL ACTS, OF ANY OF THE RELEASEES.
5. INDEMNITY AGREEMENT: I agree to indemnify and hold the releases harmless from any loss, liability, damage or costs, including reasonable attorneys fees, they may incur due to my child’s participation in the activities and use of the property and facilities of Annapolis Community Boating, Inc, whether or not such loss, liability, damage or cost results from the negligence or other action, except intentional acts, of any of the releases.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS, I AM AWARE THE AGREEMENT INCLUDES A WAIVER OF LIABILITY, AND ASSUMPTION OF RISK, AND AN AGREEMENT BY ME TO INDEMNIFY THE RELEASEES, AND I SIGN IT OF MY OWN FREE WILL.

PARENT or LEGAL GAURDIAN SIGNATURE _____
DATE _____ (Print Name) _____

PARENT or LEGAL GUARDIAN SIGNATURE _____
DATE _____ (Print Name) _____



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ANNAPOLIS COMMUNITY BOATING, INC Summer Boating Camps

Sunscreen Application Consent Form

Sunscreen application:

My child can use sunscreen during this camp Yes No

Type of Sunscreen _____

An instructor can help apply the sunscreen: Yes No

Media Release Waiver

MEDIA RELEASE FORM

MEDIA/PHOTO WAIVER: I hereby authorize and give my full consent to Annapolis Community Boating, Inc. to copyright and/or publish any and all photographs, videotapes and/or film in which I appear while attending this Annapolis Community Boating, Inc event. I further agree that Annapolis Community Boating, Inc. may transfer, use or cause to be used, these photographs, videotapes, or films for any exhibitions, public displays, publications, commercials, art and advertising purpose, and television programs without limitations or reservations.

Participants Name: _____

Parent/Guardian Signature: _____ Date: _____