

INVERNESS ROWING CLUB

NEW ADULT ROWER PROFILE

(this is NOT a membership form)

NAME

DOB

M/F

AGE

HOME ADDRESS

HOME PH

MOB PH

EMAIL

Able to swim 50m? (Excellent 5 => Adequate 1)

Rowed before? **Where?**

Level?

Years?

Rowing goals:

Sculling?	Sweep rowing?	
For fun	To compete	Not sure yet

Other sports?

Trailer / launch driver?

Any health issues? e.g. Asthma, epilepsy, diabetes, joints, allergies, cardiac, etc.

Emergency Contact

Relationship to you

Home Phone

Mob Phone

EMAIL

Signed: _____

Date: _____

	Date	Boat type	Coach
5wk Coaching Block:	1		
	2		
	3		
	4		
	5		

This form will be held in a secure place in the IRC boathouse in case it's required for health and safety reasons.