

Scotia Glenville Rowing Association  
P.O. Box 2566, Glenville, NY 12302

**Parent Agreement  
(Required)**

The Scotia Rowing Club is **not** part of the Scotia Glenville school system. It is an association of parents, with a board of directors that provides the facilities and staff so that students may participate in rowing. Membership of the student in the Scotia Rowing Club implies parental commitment to provide talent, efforts, and time to fundraise and help with club commitments. One parent of each student rower is a voting member at the club's general membership meetings.

My child, \_\_\_\_\_ may participate in the activities of the Scotia Rowing Club. I understand that, even though the health and safety of my child are the foremost concern of those conducting the training, competition, and service activities. I am responsible for the cost of all health related injuries that my child may sustain while participating in this activity.

I also give the coach or adult chaperone in attendance full authority to take whatever action he or she deems necessary for my child's health and safety, and I fully release the Scotia Rowing Club from any liability in connection with those decisions.

Parent/Guardian Name (print): \_\_\_\_\_

Signature \_\_\_\_\_

**Parent Authorization for Treatment  
(Required)**

In the event I cannot be reached in an emergency, I hereby give permission to the physician, as selected by the coach or adult chaperone in attendance, to hospitalize and secure treatment for my child. The health history I have given is correct to the best of my knowledge, and my child named above has my permission to engage in the activities of the Scotia Rowing Club.

Parent/Guardian Name (print): \_\_\_\_\_

Signature \_\_\_\_\_

**Parent Authorization for Medication  
(Optional)**

I give my permission for the coach or chaperone in attendance to give as necessary the following over the counter medications to my child named above.

Tylenol \_\_\_\_\_ Ibuprophen \_\_\_\_\_ Sudafed \_\_\_\_\_ Benadryl \_\_\_\_\_

Parent/Guardian Name (print): \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_