

Join Sound Rowers!

New Member ____ Renewal ____ (My Address/Phone/Email has changed): ____

Individual (\$30) ____ Family (\$40) ____ Junior 13-17 (Free) ____ Senior 70+ (Free) ____

Names: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

Email: _____

Today's Date: _____

If applying for a free membership, please state your age: _____

We want to encourage communication within the racing community while respecting your privacy. To that end we will not share digital email, address, or phone lists. We do periodically make available a hard copy list of current and recent members, their hometowns, e-mail addresses, and perhaps phone numbers to our current membership. You'll be given a chance to opt out of that list, if you wish.

I agree to abide by Sound Rowers' safety practices and racing rules: _____
Applicant signature

I give consent for my 13-17 year old child/ward to join Sound Rowers: _____
Parent or Guardian Signature

I train and race as a: rower ____ kayaker ____ canoeist ____ pedal boater ____ other _____

Turn in this application, with payment, to your Race Director

Or

Mail with check payable to Sound Rowers to:

Sound Rowers
Attn: Membership
PO Box 804
Seahurst WA 98062