

INTRODUCTION TO FLAT WATER KAYAK

GENERAL INFORMATION

The Philadelphia Canoe Club follows the American Canoe Association curriculum for Kayak Training. This course is designed for students with little or no formal kayak training. Lessons will include basic strokes, safety and rescue on flat moving water. Training will be conducted on the Schuylkill River. Reservations and payment must be received 5 days in advance of the course date. For questions, contact:

June 27, 2009, Walt Birbeck, 856-785-2406 or wallybear@comcast.net

MINORS 12-17 YEARS OF AGE

To participate in the class, a paddling parent or guardian must accompany a minor.

EQUIPMENT

You are welcome to provide your own equipment; i.e., boat, paddle, sprayskirt and life jacket; subject to instructor approval. PCC will have equipment, including a limited number of touring kayaks, available on a first-come, first-served basis.

DATE June 27, 2009, **Schuylkill River, 8AM to 5PM**

PRICE PER PERSON

COURSE

ADULTS

\$100

MINORS

\$50

HOW TO APPLY

1. Go to the Application page and complete all information (one application per student).
2. Sign the American Canoe Association waiver.
3. Write a check payable to the "Philadelphia Canoe Club."
4. Mail the Application, the signed waiver and your check to the Course Leader.
5. Keep this page for future reference.



REFUND POLICY

COURSE – Cancellations or dropouts prior to **June 26, 2009** will be granted a refund of \$60 for adults and \$30 for minors. No refunds will be granted for cancellations or dropouts on **June 26, 2009** and subsequent.

SPECIAL INSTRUCTIONS FOR WAIVER FORM (TOP):

PLEASE **ONLY SELECT** EITHER:

1ST BOX: "I am currently an ACA member." (include ACA membership number)

OR

LAST BOX: "I would like an ACA Event Membership for \$5.00 (one activity membership, no member benefits)."

YOU CANNOT JOIN THE ACA THROUGH PCC.

If you want to become an ACA member, you may do so at <http://www.americancanoe.org>.

PCC is an ACA AFFILIATE.

If you are a PCC member you will get a discount on ACA membership.

YOU KEEP THIS PAGE

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INTRODUCTION TO KAYAK

WHAT YOU NEED TO BRING

- Water - in an enclosed plastic container.
- Lunch and Snacks - lunch will be eaten at the Clubhouse
- Sunscreen
- Sunglasses and a hat - with retainers for sun protection
- Suitable water clothes and shoes - wet suits, dry suits, Polypro long underwear, bathing suit, depending on the weather and water temperature.
A paddling jacket or rain jacket. Soft soled sneakers or water shoes (no flip flops). .
- Dry clothes and a towel - you will be in the water
- Small pad and pencil

HANDY TIPS

Car keys and eyeglasses share special space in river bottom heaven. Keep your car keys securely attached to your person. A sturdy cord around your neck is best. Do not give them to anyone else. Do not tie them to your boat. Put "Croakies" on your eyeglasses or tie a cord securely to both sides of the glasses. If you are not sure whether your method of securing car keys and glasses will work, ask your Instructor.

DIRECTIONS TO THE CLUBHOUSE

From Interstate 76 (Schuylkill Expressway), take exit 340A. This will put you on the City Avenue Bridge, crossing over the Schuylkill River. Stay in the right hand lane. Follow the green overhead sign saying Ridge Avenue West. Go to the bottom of the ramp. Bear right. At the traffic light 100 FEET BEYOND THE RAMP, be in the left -hand lane. This is NOT an intersection. It is a pedestrian crossing and a SEPTA turnaround. Look to your left. You will see people waiting for buses. Turn left at the traffic light and go on to the driveway. Continue along the driveway, past the fence, to the bottom. If no parking is available along the driveway, turn right at the bottom and follow the "ADDITIONAL PARKING" signs.

SECURITY

The Philadelphia Canoe Club is not responsible for any loss or damage to your property while attending our classes. Do not bring any valuables to the Philadelphia Canoe Club. Do not leave anything valuable in your car while at the class.

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27-Jun-09

1. COMPLETE THE FOLLOWING APPLICATION (ONE APPLICATION PER STUDENT).
2. COMPLETE AND SIGN THE WAIVER.
(At the top, check either "I am an ACA member." or "I would like an ACA event membership.")
3. MAIL THIS APPLICATION, YOUR SIGNED WAIVER AND PAYMENT TO THE COURSE LEADER.

COURSE LEADER	MAIL APPLICATION TO:	QUESTIONS:
Walt Birbeck	P.O. Box 136 Mauricetown, NJ 08329	856-785-2406 wallybear@comcast.net

HOW DID YOU FIND OUT ABOUT THIS COURSE?

NAME	DAY PHONE
ADDRESS	NIGHT PHONE
CITY, STATE, ZIP	E MAIL ADDRESS
EMERGENCY CONTACT	EMERGENCY PHONE NUMBER

**PLEASE ANSWER THE FOLLOWING QUESTIONS SPECIFICALLY
TO ENSURE SUITABLE GROUP PLACEMENT.**

PADDLING EXPERIENCE	I WANT TO BE IN A GROUP WITH	CAN YOU SWIM?	AGE	GENERAL FITNESS	ALLERGIES	MEDICAL OR PHYSICAL LIMITATIONS

PRICE PER PERSON
(Includes \$5 ACA Event Fee)

	ADULT	MINOR	ADULT	MINOR
COURSE	\$100	\$50		
Height:				
Weight:				
Make checks payable to: Philadelphia Canoe Club	TOTAL AMOUNT PAID:			

Equipment you plan to bring is subject to instructor approval

I will bring my own boat (circle) Yes / No ? Please specify make & model of your kayak:

I will bring MY OWN (circle all that apply that you plan to bring with you):
 Helmet Spray Skirt Life Jacket Paddle

PLEASE MAKE CHECKS PAYABLE TO: THE PHILADELPHIA CANOE CLUB



AMERICAN CANOE ASSOCIATION MEMBERSHIP FORM



All participants in ACA-insured activities must be ACA members in one of the following categories (choose one):

I am currently an ACA member. My member number appears below. (Check here if renewing with this form <input type="checkbox"/>) <input type="checkbox"/>	I would like a one-year ACA Paddle America Club Membership for: (check & circle one) Individual \$30 Family (2 adults & minors) \$40 <input type="checkbox"/>	I would like a one-year ACA Membership for: (check & circle one) Individual \$40 Family (2 adults & minors) \$60 <input type="checkbox"/>
I would like a one-year Student Membership for \$25 (under 18, or under 23 with copy of student ID) <input type="checkbox"/>	I would like an ACA Introductory Membership for \$10 (Six month full membership with benefits, including <i>Paddler</i> Magazine) <input type="checkbox"/>	I would like an ACA Event Membership for \$5 (one activity membership, no member benefits) <input type="checkbox"/>

AMERICAN CANOE ASSOCIATION ADULT WAIVER & RELEASE OF LIABILITY READ BEFORE SIGNING

IN CONSIDERATION of being permitted to participate in any way in the American Canoe Association, Inc. sports and recreation program and related activities ("Activities") I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of paddlesports and related activities and that I am qualified, in good health, in proper physical condition to participate in such activity and willingly agree to comply with the stated and customary terms and conditions of participation. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. If I decide to leave early and not complete the trip as planned, I assume all risks inherent in my decision to leave.

2. FULLY UNDERSTAND that: (a) Paddlesports and related ACTIVITIES INVOLVE RISKS AND DANGERS OF DAMAGE TO PERSONAL PROPERTY AND SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the American Canoe Association, Inc., its Paddle America Clubs, affiliated clubs and organizational affiliates, their respective ACA certified instructors, certified instructor trainers, and certified instructor trainer educators, administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, INJURIES, DAMAGE TO PROPERTY, OR OTHER DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Name (print) _____ Date of Birth _____ ACA # (if any) _____

Street Address _____

City _____ State _____ Zip _____

Email _____ Phone _____

Date _____ Adult Signature _____

Name / Description of Activity or Event _____

Sponsoring Club / Organization _____ Activity Date _____



AMERICAN CANOE ASSOCIATION MEMBERSHIP FORM



All minor participants in ACA-insured activities must be ACA members in one of the following categories (choose one):

I am currently an ACA member. My member number appears below. (Check here if renewing with this form <input type="checkbox"/>)	<input type="checkbox"/>	I would like a one-year Student Membership for \$25 (Under 18, or under 23 with copy of student ID)	<input type="checkbox"/>
I would like an ACA Introductory Membership for \$10 (Six month full membership with benefits, including Paddler Magazine)	<input type="checkbox"/>	I would like an ACA Event Membership for \$5 (One activity membership, no member benefits)	<input type="checkbox"/>

AMERICAN CANOE ASSOCIATION MINOR WAIVER & RELEASE OF LIABILITY READ BEFORE SIGNING

IN CONSIDERATION of being permitted to participate in any way in the American Canoe Association, Inc. sports and recreation program and related activities ("Activities") I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of Paddlesports and related Activities and that I am qualified, in good health, in proper physical condition to participate in such Activity and willingly agree to comply with the stated and customary terms and conditions of participation. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. If I decide to leave early and not complete the trip as planned, I assume all risks inherent in my decision to leave.

2. FULLY UNDERSTAND that: (a) Paddlesports and related ACTIVITIES INVOLVE RISKS AND DANGERS OF DAMAGE TO PERSONAL PROPERTY AND SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE American Canoe Association, Inc., its Paddle America Clubs, affiliated clubs and organizational affiliates, their respective ACA certified instructors, certified instructor trainers, and certified instructor trainer educators, administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, INJURIES, DAMAGE TO PROPERTY, OR OTHER DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

MINOR PARTICIPANT: I, THE MINOR PARTICIPANT, HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Minor Name (print) _____ Minor Date of Birth _____ ACA # (if any) _____

Minor Street Address _____ Minor Phone _____

Minor City _____ Minor State _____ Minor Zip _____ Minor Email _____

Date _____ Minor Signature _____

PARENT OR GUARDIAN: I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF PADDLESPO RTS AND RELATED ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

Parent/Guardian Name (print) _____ Parent/Guardian ACA # (if any) _____

P/G Street Address _____ P/G Phone _____

P/G City _____ P/G State _____ P/G Zip _____ P/G Email _____

Date _____ Parent / Guardian Signature _____

Activity Description _____ Sponsoring Org. _____ Activity Date _____