

ONE DAY INTRODUCTION TO WHITEWATER KAYAKING

Saturday, July 25, 2009

GENERAL INFORMATION

The Philadelphia Canoe Club follows the American Canoe Association guidelines and curriculum for kayak safety and training. These one-day courses are designed for students with little or no formal kayak training. Lessons include basic strokes, maneuvers, assisted and self-rescue, river reading and safety. It is a basic course intended to introduce students to the essentials of white water river kayaking. Successful completion of this course will allow students to participate in PCC's Thursday night Flatrock Trips on the Schuylkill River if qualified. Reservations and payment must be received 5 days in advance of the course date. For questions contact:

Judy Ayala - 267-468-0697 or ayalajm@verizon.net

MINORS - 12 TO 17 YEARS OF AGE

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

EQUIPMENT

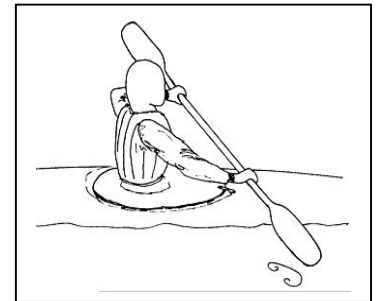
You are welcome to provide your own equipment; i.e., boat, paddle, spray-skirt and life jacket; subject to instructor approval. PCC will have a limited number of white water kayaks available on a first-come, first-served basis. Participants who want to use the PCC equipment will be required to come to the Clubhouse on the Friday evening preceding the Course Date for a "Boat Fitting" that will take about 15 minutes. You will be contacted sometime the week before the course begins to arrange a "Boat Fitting" appointment.

SCHEDULE

7:30 AM - 5:00 PM - PCC Clubhouse and Schuylkill River.

PRICE - PER PERSON COURSE

| | |
|---------------|---------------|
| ADULTS | MINORS |
| \$100 | \$50 |



HOW TO APPLY

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

REFUND POLICY

COURSE – Cancellations or dropouts prior to **July 24, 2009** will be granted a refund of \$60 for adults and \$30 for minors. No refunds will be granted for cancellations or dropouts on **July 24, 2009** or subsequent.

SPECIAL INSTRUCTIONS FOR ACA WAIVER FORM (TOP):

PLEASE ONLY SELECT EITHER:

1ST BOX : "I am currently an ACA member....(include our ACA 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 get a discount on ACA membership.

YOU KEEP THIS PAGE **Rev 1-09**

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WHAT YOU NEED TO BRING

River Sessions:

- Lunch (we will eat at the Clubhouse).
- Drinking water for the river in plastic bottles with caps.
- Change of dry clothes (you will get wet).

Clothes for the River:

- Bathing suit, tee shirt, shorts. (no cotton clothing)
- Top and bottom polypro or wool underwear.
- Paddling jacket, rain jacket or windbreaker.
- River booties, beach shoes or sneakers with laces removed.

Accessories: Sunglasses, sunscreen and visor.

HANDY TIPS

Car keys and eyeglasses share special space in river-bottom heaven. Keep your car keys securely attached to your person. Do not give them to anyone else. Do not tie them to your boat. Put "Croakies" on your eyeglasses or tie either end of a string 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 into a dirt 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.

YOU KEEP THIS PAGE

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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: |
| Judy Ayala | 1303 Hartranft Ave Fort Washington, PA 19034 | 267-468-0697 ayalajm@verizon.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 Magazine</i>) <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 _____