

Litchfield Hills Rowing Club  
 P.O. Box 42 Litchfield, CT 06759  
 litchfieldhillsrc.org

**MASTERS MEMBERSHIP APPLICATION**

**PLEASE PRINT LEGIBLY  
 INDIVIDUAL INFORMATION**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Home Phone: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_  
 Previous rowing experience: \_\_\_\_\_  
 Height: \_\_\_\_\_ Weight: \_\_\_\_\_.

**EMERGENCY CONTACT INFORMATION**

Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_

**Swim Test (Please sign)**  
 All rowers must be able to swim in an emergency situation. Please sign below to show that you can swim:  
 \_\_\_\_\_

**USRA Membership**  
 USRA Membership is REQUIRED (usrowing.com or 1800-314-4769)  
 Membership #: \_\_\_\_\_  
 Expiration Date: \_\_\_\_\_

**COST OF MEMBERSHIP**

Year	Fees		
<b>2008</b>	<b>Annual: \$450.00</b>		
	<b>Spring: \$200</b>	<b>Summer: \$250</b>	<b>Fall: \$200</b>

Make checks payable to: Litchfield Hills Rowing Club, Inc. (LHRC)  
 Attn: Corinne Houle  
 Litchfield Hills Rowing Club  
 P.O. Box 42  
 Litchfield, Ct 06759

All equipment is owned by the Litchfield Hills Rowing Club, Inc.

Received by:	Payment for:	