



Rec Kayak Class 2014

Tuesdays in June - 3rd Or 17th Or 24th, OR July 15

This is a fun, short, 2 hour introduction to recreational kayaking.

The class will be held at Alum Creek State Park Beach.

Dryland instruction will cover how to fit life jackets, how to hold a paddle, how to fit your boat and other topics.

On water instruction will cover strokes and how to stay upright!

Cost: \$ 25.00

Questions to: Debbie Goetz debrd4u@aol.com

Registration deadline is one week before the class: Tuesday May 27 for the June 3 class, June 10 for the June 17 class, June 17 for the June 24 class and Tuesday July 8 for the July 15 class.

register online at <http://www.outdoor-pursuits.org/calendar?eventId=880986>

or, make checks to **Columbus Outdoor Pursuits** and mail with Application to:
Debbie Goetz, 1780 Riverhill Rd, Columbus OH 43221

Learn+Do

Rec Kayak Class

(one application per person, copies okay)

Tuesdays in June - 3rd Or 17th Or 24th, OR July 15



Tuesday June 3, 6:00 to 8:00 pm, FEE \$ 25.00

Tuesday June 17, 6:00 to 8:00 pm, FEE \$ 25.00

Tuesday June 24, 6:00 to 8:00 pm, FEE \$ 25.00

Tuesday July 15, 6:00 to 8:00 pm, FEE \$ 25.00

Name _____ Phone (h) _____ (c) _____

Address: _____ City: _____ State: _____ Zip _____

Email: _____

Emergency Contact Name & Number: _____

Parent/Guardian: _____ COP Membership# _____
(if student is under 18)

Parent/Guardian address (if not above) _____

Experience:

- 1st time kayaker
- Paddled some before

Swimming Ability:

- Good
- Fair
- Poor

Male Female Ht _____ Wt _____

I need to use COP gear (boat, paddle, PFD)

I have my own gear- brand/type of boat

I have performed a kayak wet exit and would be comfortable doing it again. Yes No

Please list any physical/health conditions, including allergies which should be known in case of an emergency or which may affect your participation in the class. You will be required to assist with carrying boats and gear. _____

Cancellations which cannot be replaced and/or no-shows will not be refunded

If the student is under 18 years of age, parental consent is required. Both the student and the parent/guardian will need to sign the Waiver & Medical forms.



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Location: Alum Creek State Park Beach.

http://www.outdoor-pursuits.org/resources/Pictures/COP_Maps/AlumCreekReservoir_wdirections_2008.pdf

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Learn+Do



Columbus Outdoor Pursuits Liability Release & Waiver

Read Before Signing

Basic Liability Waiver, Indemnification Agreement, Permission to Provide Medical Treatment & Publicity Release

In signing this agreement for myself or for the named participant (if the participant is under age 18), I know that those participating will be exposed to risks of serious bodily injury, sickness, or death due to circumstances inherent in this event, including the negligent acts or omissions of others. I also understand and am aware that there are a variety of specific risks and dangers inherent in a voluntary activity such as this including, without limitation, falls, collisions with other participants, motor vehicles, or stationary objects. I may be participating out of doors and exposed to adverse weather conditions, poor sanitation, air or waterborne microorganisms, exposure to frost bite, rising water, drowning, or falling objects. I am aware that anyone who is inadequately prepared, trained or in inadequate physical condition is more likely to be injured or killed. I further understand that there is a risk of becoming lost or separated from the rest of the group and I may incur personal liability for the costs of rescue of me or members of my family. I also understand that I may be injured while on land or while traveling via motor vehicle or on foot due to my own carelessness or because of the negligence of others. Despite these risks and in exchange for being permitted to participate in this event, I voluntarily agree to assume all of these and other risks inherent in the event.

I acknowledge that I (or the participant for whom I sign if under age 18) am physically capable and sufficiently trained for the completion of this event. I also attest that the equipment used by me (or the participant for whom I sign if under age 18) has been inspected by me and is in good condition and that I am familiar with its proper use. I am also aware that any medical support provided for this event, if any, is likely to be limited to that provided by volunteer personnel with limited first aid training who may be called upon to provide assistance to me during the event. I consent and authorize any such volunteer to assist me (or the participant for whom I sign if under age 18) or to perform such assistance as, in the opinion of such person, may be necessary or appropriate. I understand further that any such medical or other services provided to me (or the participant for whom I sign if under age 18) is not an admission of liability to provide or to continue to provide any such services and is not a waiver by any of said parties' rights under this agreement.

I understand that Columbus Outdoor Pursuits assumes no responsibility or liability with respect to my participation in this event. I agree, however, to abide by any decision of any official of Columbus Outdoor Pursuits relative to my ability to

safely participate in this event. I promise, as well, for myself or the named participant (if the participant is under 18) to wear any safety equipment as required by an official of Columbus Outdoor Pursuits such as, but not limited to, helmets, guards, or personal flotation devices. The bicycle helmet will meet the standards of CPSC, ASTM or SNELL and be worn at all times while riding the bicycle. I agree to waive my rights to any benefits associated with this event if I fail to wear appropriate safety equipment.

Having read this waiver and knowing these facts and in consideration of Columbus Outdoor Pursuits' acceptance of my application for participation in this event, I, for myself and anyone entitled to act on my behalf, do hereby agree to release, hold harmless, and discharge Columbus Outdoor Pursuits, all sponsors, representatives and volunteers, any involved municipalities or other organization and the boards, trustees, officers, employees, or volunteers of any of them, from any and all claims or liabilities of any kind arising out of my participation and/or my own acts of negligence in this event whether or not liability may arise out of negligence, recklessness or carelessness on the part of the persons or entities named in this waiver.

I also grant permission to Columbus Outdoor Pursuits and its sponsors to use any photographs, motion pictures, recordings or any record of this event for legitimate purposes.

I further agree to indemnify the persons and entities listed in this agreement for any liability they incur to me, a member of my family, or the participant in connection with this event.

I further agree that if, in breach of this agreement, I institute any judicial proceedings against any of the persons listed in this agreement in connection with this event, I shall bring them in the Common Pleas Court of Franklin County, Ohio, or in the United States District Court for the Southern District of Ohio, located in Columbus, Ohio, and I consent to personal jurisdiction in those courts. I further agree that, if in breach of this agreement, I institute any such proceedings, I am responsible for all costs and attorneys fees of any person or entity against whom I institute such proceedings.

Having Read And Understood This Agreement, I Voluntarily And Knowingly Sign It

Signature _____ *plus parent/guardian signature if participant is under 18* _____ *Date* _____

Columbus Outdoor Pursuits May 2014