****

**FREDERICTON ROWING CLUB**

**MIDDLE SCHOOL PROGRAM**

**2017**

**Student Name**: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **School:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Grade:**\_\_\_\_\_\_ **Gender**: Male\_\_\_ Female\_\_\_

Mother: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medicare Number**: \_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_ **Health Issues:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Cost**: $20.00 for 12 sessions and competition

**Dates**: 6 weeks starting the week of May 1st– June 9th. Final Competition Sunday, June 11th

**Location of Sessions**: Fredericton Rowing Centre, Small Craft Aquatic Centre

**Sessions**: All sessions 4:00-5:00pm. Select your two preferred sessions by placing a ‘**1**’ in the blank. Put an ‘**x**’ in sessions you absolutely **cannot** attend.

Mondays \_\_\_\_ Tuesdays ­­­­\_\_\_\_ Thursdays \_\_\_\_ Fridays\_\_\_\_

**Coaches:** Certified Learn to row coaches who are experienced rowers and members of the Fredericton Rowing Club

**Registration Deadline:**  April 28th ( will accept late registrations) Register on line at  [http://frederictonrowingclub.ca/?page\_id=195](%20http:/frederictonrowingclub.ca?page_id=195), click on Register or Send a copy of this form to [cblack99@nb.sympatico.ca](mailto:cblack99@nb.sympatico.ca) and bring payment to 1st session (Circle One) -cash or -cheque (made payable to Fredericton Rowing Club)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Student’s Name) has permission to participate in the FRC Middle School Program.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Parent’s Signature) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Date)

**Contact:** Debbie Black (471-2295 -Email: cblack99@nb.sympatico.ca)