

Information Sheet

use the other side for additional notes

Name _____ DOB _____ Current Grade _____

USRowing Number _____ Height _____ Weight _____

Address _____

Parent's Names _____ Home Phone _____

Mom's Work Phone _____ Cell Phone _____

Dad's Work Phone _____ Cell Phone _____

Student's Cell Phone _____ Student's Email _____

Mom's Email _____ Dad's Email _____

School _____

School addr. _____ Sch. Ph.# _____

Principal _____ Ath. Dir. _____

Spring Break Dates _____ School Holidays and any dates you would miss
practice or races from Feb. 19-May 17: _____

What time does school let out? _____ Any exceptions? _____

How will you be getting to the Boathouse? (Car pooling highly encouraged)

Taking into account traffic and safe driving, what is the earliest time, on a daily basis,
that you can be sure to arrive at the boathouse?

**My child has received a Doctor's approval to participate in this or another sport
within the past year and is covered by valid and current health care insurance.**

Parents Signature _____ Date _____

Please note any health concerns on the reverse of this form.

Call me with any questions at 215 850-4570. Please mail this sheet, along with a \$500
deposit (check payable to James Gordon or Gordon Rowing Services). Send to:

James Gordon
208 Engle Drive
Wallingford, PA 19086