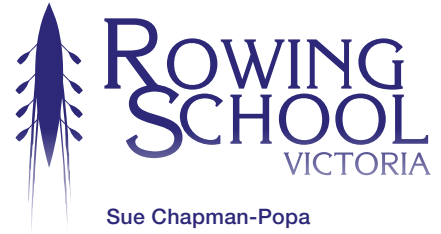


## Booking and information form

# Spring School holiday Rowing programs



**Sue Chapman-Popa**  
Olympic rower & medalist  
Director, Personal trainer, Rowing coach

M. 0415 803 032  
E. [info@rowingschoolvic.com.au](mailto:info@rowingschoolvic.com.au)

PO Box 592, Malvern VIC 3144  
[www.rowingschoolvic.com.au](http://www.rowingschoolvic.com.au)

Join the  
conversation



Rowing School Victoria offers two modules every school holidays. Module One is a sweep (one oar) program for absolute beginners and Module Two is a sculling (two oars) program catering for all levels. Both programs are suitable for everyone 13+ years.

Module One (Discover Rowing) must be completed before Module Two (Single Sculling) can be commenced

### Module One

BEGINNERS ONLY

## Discover Rowing - Sweep Program

- Beginners only
- Program runs for 2 sessions
- Duration is 2 hours per session
- Mondays & Tuesdays only

The perfect way for first-timers to discover the magic of rowing. This program is designed for students who are considering choosing rowing as their upcoming summer sport.

A great way of being introduced to terminology, technique and protocols of this unique sport!

### Module Two

ALL LEVELS

## Single Sculling Program

- Must have completed Module One (Discover Rowing)
- Beginners, intermediate and established levels available
- Duration is 2 hours per session
- Monday to Friday

Our sculling program is a fantastic way to improve sculling skills on a regular schedule during the school holidays. Casual rates or multi-session rates are available.

Whether you or your child is at the beginner, intermediate or at a more established single sculling level, many session times are available daily on most weekdays for the duration of the school holidays.

### All weather

Rowing School Victoria runs all weather programs. All programs will run rain or shine.

### What to bring

- Rowing Zootie, bike pants or old shorts (nothing loose like basketball pants)
- Water bottle
- Hat
- Sunscreen
- Sunglasses
- Thongs
- Socks and runners
- Towel
- Full change of clothes
- Jumper or wet weather top (nothing too good, it may get grease on it)

### Rescheduling

If you require session dates to be rescheduled during the school holiday period, pending availability, Rowing School Victoria will happily oblige, no penalty will be incurred.

### Cancellation and refund policy

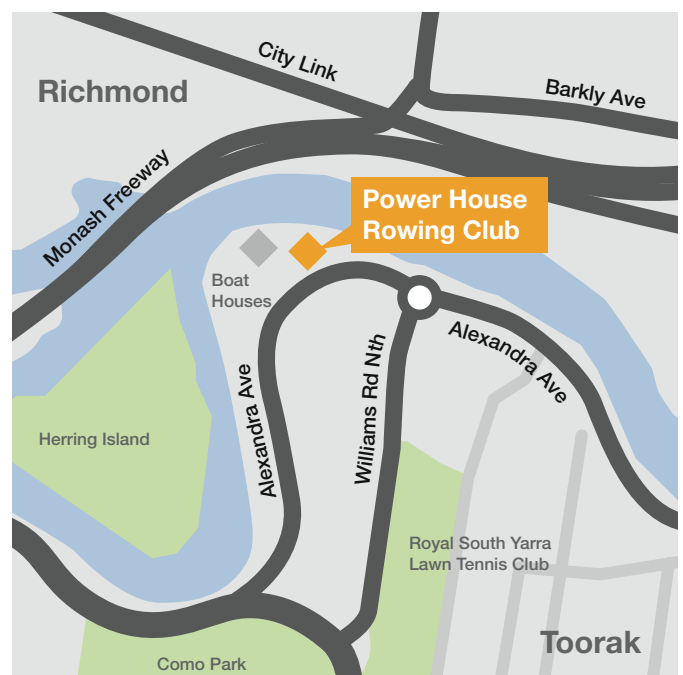
- If cancellation occurs 14+ days before the first scheduled session date a refund of 90% will be given.
- If cancellation occurs 8-13 days before the first scheduled session date a refund of 50% will be given.
- If cancellation occurs 7 days before the first scheduled session date no refund will be given.

### Location

**Power House Rowing Club, Alexandra Avenue, Toorak**

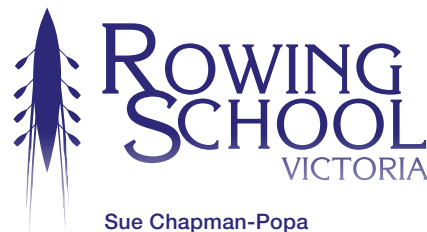
The Rowing Club is located near the intersection of Williams Road North and Alexandra Avenue on the banks of the Yarra River.

MELWAYS REF 58 G1 or REF 2M D1



Spring school holiday rowing programs

# Booking form Part A



**Sue Chapman-Popa**  
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Please tick which sessions you wish to sign up for below, then complete Part B.

## Module One - Beginners only Discover Rowing - Sweep Program

- Sweep – Beginners Level 1
- Sweep – Beginners Level 2

## Module Two - All levels Single Sculling Program

- Sculling – Beginners Level 1
- Sculling – Beginners Level 2
- Sculling – Intermediate
- Sculling – Established

## Spring holidays 2018

Monday 24th September - Friday 5th October

Programs are suitable for 13+ years

TIME	Monday	Tuesday	Wednesday	Thursday	Friday
8am to 10am	<b>Module Two Sculling Established</b> <input type="checkbox"/> 24/09/18 <input type="checkbox"/> 01/10/18	<b>Module Two Sculling Established</b> <input type="checkbox"/> 25/09/18 <input type="checkbox"/> 02/10/18	<b>Module Two Sculling Established</b> <input type="checkbox"/> 26/09/18 <input type="checkbox"/> 03/10/18	<b>Module Two Sculling Established</b> <input type="checkbox"/> 27/09/18 <input type="checkbox"/> 04/10/18	<b>Module Two Sculling Established</b> <input type="checkbox"/> 28/09/18 <input type="checkbox"/> 05/10/18
10am to 12pm	<b>Module One Sweep Beginners L1</b> <input type="checkbox"/> 24/09/18 <input type="checkbox"/> 01/10/18	<b>Module One Sweep Beginners L2</b> <input type="checkbox"/> 25/09/18 <input type="checkbox"/> 02/10/18	<b>Module Two Sculling Beginners L1</b> <input type="checkbox"/> 26/09/18 <input type="checkbox"/> 03/10/18	<b>Module Two Sculling Beginners L2</b> <input type="checkbox"/> 27/09/18 <input type="checkbox"/> 04/10/18	<b>Module Two Sculling Intermediate</b> <input type="checkbox"/> 28/09/18 <input type="checkbox"/> 05/10/18

### Please note

After attending a Beginners Level 1 session, you will graduate to Beginners Level 2 – and so forth.

\*Places for 4 participants per session only

Please make sure you return the following three forms and full payment to complete your registration.

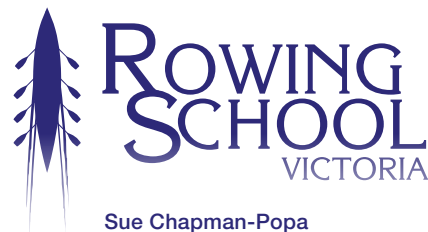
Email [info@rowingschoolvic.com.au](mailto:info@rowingschoolvic.com.au) or mail to PO Box 592, Malvern VIC 3144

1. Booking Form Part A - Session selection form
2. Booking Form Part B - Registration and emergency contact form
3. Waiver, informed consent form and covenant not to sue form
4. Full payment

Spring school holiday rowing programs

# Booking form Part B

Please fill out your registration and emergency contact details, then complete the waiver form.



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Name.....

Ambulance subscription YES  NO

Date of birth.....

Illnesses, medication or medical conditions that Rowing School Victoria need to be aware of (e.g. asthma)

Address .....

.....

.....

.....

.....Postcode .....

.....

Phone.....

Emergency contact.....

Fax .....

Emergency phone .....

Email .....

Relationship .....

## Payment

### Discover Rowing - Sweep Program - Beginners only

\$110 per person, includes both sessions

**Total \$** \_\_\_\_\_

### Single Sculling Program - All levels

\$55 per person, per session          no. of sessions \_\_\_\_\_ x \$55

**Total \$** \_\_\_\_\_

#### Payment options

Deposits and full payments can be made by the following payment options.

- CASH**                      to Sue Chapman-Popa  
   (prior to day of program)
- CHEQUE**                      payable to S.C. POPA
- PAYPAL**                      [suechapmanpopa@yahoo.com](mailto:suechapmanpopa@yahoo.com)

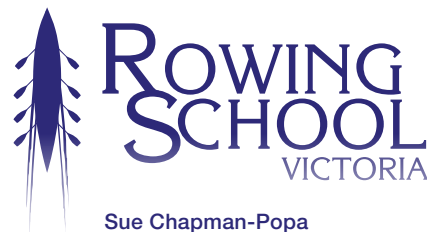
#### DIRECT BANK DEPOSIT

Account name	S C Popa
Bank	Commonwealth Bank
Branch	Malvern
BSB	063 143
Account Number	1014 2313
Reference	Full name

I attach my bank receipt for payment made on \_\_\_\_/\_\_\_\_/\_\_\_\_ for \$\_\_\_\_\_ total

The reference details must include your name. If you are unable to supply a printout of the payment receipt with reference as requested above, you must email Rowing School Victoria at [info@rowingschoolvic.com.au](mailto:info@rowingschoolvic.com.au) or call Sue on 0415 803 032 and advise that payment has been made. If you cannot provide proof then it may be deemed unpaid.

# Waiver, informed consent, and covenant not to sue



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## Sue Chapman Popa / Rowing School Victoria Waiver, Release and Assumption of Risk

This form is an important legal document. It explains the risks you are assuming by beginning an exercise program. It is critical that you read and understand it completely. After you have done so, please print your name legibly and sign in the spaces provided at the bottom.

I, ....., have volunteered to participate in a program of physical exercise under the direction of Sue Chapman-Popa/Rowing School Victoria, which will include, but may not be limited to, rowing (sweep and sculling), ergometres, sessions in the rowing tank, general exercise, all weight and/or resistance training. In consideration of Sue Chapman-Popa/Rowing School Victoria agreement to instruct, assist, and train me, I do here and forever release and discharge and hereby hold harmless Sue Chapman-Popa/Rowing School Victoria, and their respective agents, heirs, assigns, contractors, and employees from any and all claims, demands, damages, rights of action or causes of action, present or future, arising out of or connected with my participation in this or any exercise program including any injuries resulting there from.

THIS WAIVER AND RELEASE OF LIABILITY INCLUDES, WITHOUT LIMITATION, INJURIES WHICH MAY OCCUR AS A RESULT OF (1) EQUIPMENT THAT MAY MALFUNCTION OR BREAK (2) ANY SLIP, FALL, DROPPING OF EQUIPMENT AND (3) OUR NEGLIGENT INSTRUCTION OR SUPERVISION.

### Assumption of Risk

I, ....., recognize that exercise might be difficult and strenuous and that there could be dangers inherent in exercise for some individuals. I acknowledge that the possibility of certain unusual physical changes during exercise does exist. These changes include abnormal blood pressure; fainting; disorders in heartbeat; heart attack; and – in rare instances – death.

I understand that as a result of my participation in an exercise program, I could suffer an injury or physical disorder that could result in my becoming partially or totally disabled and incapable of performing any gainful employment or having a normal social life.

I recognize that an examination by a physician should be obtained by all participants prior to involvement in any exercise program.

If I, ....., have chosen not to obtain a physician's permission prior to beginning this exercise program with Sue Chapman-Popa /Rowing School Victoria, I hereby agree that I am doing so at my own risk.

**I can swim at least 100 metres in rowing attire** (please tick)

**I have had a tetanus shot in the last 10 years** (please tick)

In any event, I acknowledge and agree that I assume the risks associated with any and all activities and/or exercises in which I participate.

I acknowledge and agree that no warranties or representations have been made to me regarding the results I will achieve from this program. I understand that results are individual and may vary.

I ACKNOWLEDGE THAT I HAVE THOROUGHLY READ THIS WAIVER AND RELEASE AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY. BY SIGNING THIS DOCUMENT, I AM WAIVING ANY RIGHT I OR MY SUCCESSORS MIGHT HAVE TO BRING A LEGAL ACTION OR ASSERT A CLAIM AGAINST SUE CHAPMAN-POPA/ ROWING SCHOOL VICTORIA FOR YOUR NEGLIGENCE OR THAT OF YOUR EMPLOYEES, AGENTS, OR CONTRACTORS.

Participant's signature..... Date .....  
(guardian/parent to sign if participant is under 18 years)

Please print name ..... (guardians and parents only),

on behalf of.....