JUNIOR REGISTRATION FORM
WINTER 2022/2023
NOVEMBER 7-MARCH 3, 2022

First Name_____Middle Name_____

Last Name_____Age_____Birthdate_____

Street Address_____City_____ State_____Zip_____

Home Phone_____Rower's cell phone_____

Rower's email _____ Parent's Names_____

Mother's Cell _____Father's cell_____

Mother's email _____ Father's email_____

School name_____Year 8th__9th__10th__11th__12th__

Fees ***Elite Racing*** **Monday-Saturday ____$1100.00**

Intermediate Monday,Tuesday, Wednesday,Fri ____ $950.00

Time**: 3:30-5:30pm**

Additional Fees:
Regattas- To be charged separately.

I confirm my child can swim 100 feet in light clothing: Yes/No
Signature:_____

I give permission for my child to participate in the GMS Rowing Program.
Signature (Parent or Guardian)_____

PAYMENT (Check or Cash) - This is non refundable, payable to GMS Rowing Center.

Mailing Address: PO Box 1647 New Milford, CT 06776
Boathouse: 172 Grove St. New Milford, CT 06776
860-350-4004 www.gmsrow.com