



Adult Learn to Row Level 1 May 2025

Name _____ Age _____ Date of Birth _____

Street Address _____ City _____ State _____ Zip Code _____

Phone _____ Email _____

Dates: Wednesdays-May 7, May 14, May 21, May 28

Time: 6:00pm-7:30pm

Each session requires a minimum of 4 participants.

Fee: 4 weeks. \$150

Declaration of Health

I hereby confirm that I do not suffer from any known medical or physical condition that might affect me during physical exercise. **Yes/No**

I hereby confirm that I can swim 100 feet in light clothing. **Yes/No**

I hereby confirm my ability to lift 40 pounds. **Yes/No**

Signature: _____ **Date** _____

Wear/Bring- Sneakers, tight fitting clothing and layers and a non-disposable water bottle.

PAYMENT (Cash or Check) - Payable to GMS Rowing Center.

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