



## 2010 MEMBERSHIP APPLICATION

Please complete this membership application form fully and sign the attached release and waiver of liability on the reverse side. Return application/waiver of liability and full membership payment to:

**Baltimore Dragon Boat Club, Inc.**  
**P.O. Box 4583**  
**Timonium, Maryland 21094-4583**

### APPLICANT INFORMATION:

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Cell Phone Carrier: \_\_\_\_\_ Other Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Paddle Side Preference: Right Left No Preference (circle one)

Catholic Charities Team: \_\_\_\_\_

Please list any other dragon boat or other paddling/rowing experience: \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

### HEALTH INFORMATION:

Do you have any physical or mental conditions that may affect your ability to paddle safely?

If yes, please explain: \_\_\_\_\_ Other medical conditions: \_\_\_\_\_

The Baltimore Dragon Boat Club, Inc. recommends you consult your physician or medical professional prior to participating in this activity as it may be too physically strenuous for certain individuals, and as such, your medical professional should determine whether dragon boating is appropriate for you.

### MEMBERSHIP FEES:

(NON-REFUNDABLE; NON-TRANSFERABLE)

\$100.00 Annual Membership Fee (after July 1, 2010 - \$50.00 for ½ year membership fee)

Please list your reasons for wanting to join the Baltimore Dragon Boat Club (please check all that apply)

- Steering
- Drumming
- Coaching
- Club Organization/Participation/Volunteer
- Paddling
- Friendship/Social
- Other

How did you learn about the Baltimore Dragon Boat Club? \_\_\_\_\_