

**BHRA SPRING BREAK TRAINING 2012
REGISTRATION INTENT FORM**

NAME: _____

ADDRESS: _____

PHONE #: _____

EMAIL: _____

EMERGENCY CONTACT: _____

CONTACT PERSON'S PHONE#: _____

My child has permission to participate in the BHRA's Spring Break Training.

PARENT SIGNATURE

What would you like your child to accomplish from this week of training? _____

Agreement: I agree to exemplify a positive attitude on this trip. I will abide by the BHRA Trip Rules and Regulations. I realize that I may be returned home, at my parent's expense, if not in compliance. I will treat all persons & property with respect. I will put forth my best effort to help my self and my fellow teammates.

ROWER SIGNATURE

Please describe what you would like to achieve on this trip.

T-shirt Size: _____

PLEASE RETURN THIS REGISTRATION FORM AT PRACTICE TO:

Mike Meier or Donica Anderson