

PETERBOROUGH ROWING CLUB

REGISTRATION FORM

Date: _____

Last Name: _____

First Name: _____

Mailing Address:

Street: _____

PO Box: _____ Rural Route: RR # _____

City: _____ Postal Code: _____

Phone#: (_____) _____

Work#: (_____) _____

Cell#: (_____) _____

E-mail Address: _____

Birthdate: day: _____ / month: _____ / year: _____ Age: _____

Gender: Female Male

Category: High School University Club-Competitive Club-Recreational

School (if applicable): _____

Grade: _____

Weight (used for weight Classification): _____ lbs or _____ kg

Parent(s) Name (for participants under 18): _____

Parent's E-mail Address: _____

(for the purpose of contacting/sending information to parents if rower is under 18)
