



# St John's College Boat Club – Alumni Rowing: Temporary Membership & Disclaimer Form

## One-off Participation Agreement

**This form must be completed and submitted prior to any alumni participation in rowing activity.**

Please read and sign the declaration carefully. Your safety and that of others is our priority.

## Participant Details

**Full Name:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Graduation Year:** \_\_\_\_\_

**Date of Rowing Session:** \_\_\_\_\_

## Eligibility & Safety Declarations

By signing this form, I confirm the following:

- ☐ I am a former member of St John's College, Durham.
- ☐ I have prior experience rowing in a recognised rowing club or institution.
- ☐ I can swim at least **100 metres in light clothing** and can **tread water for at least 2 minutes**.
- ☐ I am familiar with basic rowing safety, including capsize procedures.
- ☐ I am physically fit to row and have **no medical conditions or injuries** that may impede my participation.
- ☐ I understand that I should notify the organiser of any health condition and how to respond or administer any first aid in an emergency.

- ☐ Has had inherent risks including but not limited to physical strain, collisions, and water-related hazards explained to them
- ☐ I understand that this is a **non-competitive, one-off participation session** and that I am not a regular member of the club.
- ☐ Has been instructed to notify the session organiser of any relevant health concerns or changes in condition prior to the activity.

### **Code of Conduct & Risk Acknowledgement**

- I agree to follow the instructions of the **Club Captain, Coach, or designated session leader** at all times.
- I understand that rowing carries inherent risks including but not limited to physical strain, collisions, and water-related hazards.
- I understand that **St John's College and the Boat Club accept no liability** for any personal injury, loss or damage sustained during participation, except in cases of proven negligence.
- I agree to notify the session organiser of any relevant health concerns or changes in condition prior to the activity.

### **Consent and Declaration**

- ☐ I confirm that the information provided above is accurate and that I participate **entirely at my own risk**.
- ☐ I give my consent to receive any necessary first aid or medical treatment during the session if required.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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For any questions or concerns, please contact the **Boat Club Captain** at [johns.boatclub@durham.ac.uk](mailto:johns.boatclub@durham.ac.uk) or the **College Alumni Office** at [johns.alumni@durham.ac.uk](mailto:johns.alumni@durham.ac.uk).