

CAMPS OVERVIEW

TRAININGS

This camp offers one day daily trainings on the Black River. Trainings are provided by Kimberly Carroll of Paddle Junkie and assisted by national and international level coaches. All paddlers at camp will take part in a video review. Campers can expect to work hard on the water but will also learn new approaches to technique, training methods, and race tactics both on and off the water.

LODGING, TRANSPORT AND TRAVEL INSURANCE

These services are not included in the training camp registration cost. It is the participant's responsibility to book these services.

REGISTRATION

Paper form (by mail or email) AND check or Venmo to @boundarywaterspaddlesports

ADDRESS : 3827 Center Road, Georgetown, SC 29440

EMAIL : boundarywaterspaddlesports@gmail.com

IMPORTANT NOTES

First booked, first entered. All registrations will be considered official ONLY UPON RECEIPT OF PAYMENT. Travel and lodging are the responsibility of the participant. We are in no way responsible for refunding/compensating registration fees or any other fees associated with travel or lodging.

REFUND AND CANCELLATION POLICY

Request for refund or cancellations must be received in writing to be effective. You can send this by email to boundarywaterspaddlesports@gmail.com.

Before January 13, 2023: 80% will be refunded

Between January 14 and March 1, 2023: 50% will be refunded

After March 2, 2023: no refund

COST

\$ 65.00 Registration fee for the one-day Intro to Outrigger Racing 9:30 AM to 2:30 PM on April 9, 2023

\$ 65.00 Registration fee for the one-day Tackle Your Time Trial 9:30 AM to 2:30 PM on April 10, 2023

\$ 20.00 Optional T-Shirt Please Circle Size: XS S M L XL XXL

WAIVER & REGISTRATION FORM

BY SIGNING THIS FORM YOU ARE WAIVING IMPORTANT LEGAL RIGHTS. PLEASE READ CAREFULLY THIS FORM

1. This Waiver covers my participation in the training Paddle Junkie camp at Boundary Waters Coaching & Conditioning in Georgetown, SC, held between April 9, 2023 to April 10, 2023.
2. Participating in the above activity involve risks, dangers and hazards. For example, a boat could capsize or boats could collide in good or bad weather. An approved personal flotation device ("PFD") is to be worn by all participants at all times while on the dock or on the water. I am aware that by participating in the above activities I am risking personal injury, death, or damage to property on shore at the facility or while on the water, and I accept and assume those risks personally.
3. I release the following companies and people:
 - (a) Paddle Junkie
 - (b) Boundary Waters Coaching & Conditioning
 - (c) The directors, officers, employees, agents, independent contractors and volunteers any of the above (all of whom are referred to as the Releasees in this Waiver Form), from any and all liability for any loss, damage, injury or expenses that I may suffer as a result of my participation in the activity above, no matter how caused, including if caused by the negligence of any of the Releasees.
4. If someone sues me for negligence, I agree not to claim contribution or indemnity from any of the Releasees. I release the Releasees from all liability that could arise from such a contribution or indemnity claim.
5. I agree to hold harmless and indemnify the Releasees in respect of any claims, liability or legal expenses that they incur arising directly or indirectly by reason of a claim brought by me against any person or entity for loss, damage, injury or expenses suffered by me. For example, if I sue a member of another team or my coach or volunteer for negligence, and that person in turn claims contribution or indemnity from Paddle Junkie and Boundary Waters Coaching & Conditioning, then I am agreeing to pay Paddle Junkie and Boundary Waters Coaching & Conditioning for all liability claims and legal expenses that it incurs in connection with the contribution and indemnity claim.
6. I confirm that I have attained the age of 18 years or if not, my parent or guardian has signed this Waiver.
7. I recognize and agree that I am not allowed to participate in the activity above unless I sign this Waiver. I agree that this Waiver is binding on me and on my heirs, executors, administrators and legal representatives.

FIRST & LAST NAME

TEAM NAME

ADDRESS (STREET #, STREET NAME, CITY, POSTAL/ZIP CODE)

DD / MM / YYYY

EMAIL

PHONE NUMBER

DATE OF BIRTH

MEDICAL CONDITION OUR STAFF SHOULD BE AWARE OF (SPECIFY)?

NAME OF A CONTACT PERSON IN CASE OF EMERGENCY

HER/HIS PHONE NUMBER

OC Racing: 1-Day Racing Intro April 9

Optional T-Shirt

OC Time Trial: 1-Day Time Trial April 10

Optional T-Shirt

I confirm I have read the refund/cancellation policy and all other information regarding this camp written on the previous page, and I accept to follow all that is written.

SIGNATURE OF PARTICIPANT

DATE