



November 22, 2014

Dear Sistership Members,

Please find enclosed the annual registration package for the 2015 dragon boat season.

The following documents are included:

- Mission Statement
- Paddling Registration Form
- Pre-Season Health Questionnaire
- Par-Q & You Form
- 2015 Waiver
- Members' Pledge

Completed documents are to be returned by **January 3, 2015**. This year's registration fee is \$125.00 and the membership fee is \$20. If you have not paid the membership fee (collected at the AGM), please include this with your payment. An equipment deposit cheque of \$350.00 is required from each active paddler. **Please do not date this, instead initial beside the date space.** The cheque will only be cashed to cover costs of lost, not returned, or neglected/damaged equipment (PFDs, paddles, and racing shirts). The treasurer will shred any cheques previously submitted or, alternatively, you can make arrangements to pick up your cheque from her.

Crews will not be fully determined until February or March, when our numbers will be better established.

Group dry land training will start in mid-February. Participation in the dry land training program is a requirement for registration. It is recommended that a twice-weekly minimum be followed. More information will be available at a later date.

Sistership's water practices take place twice-weekly on the Glenmore Reservoir from May – September. Although it is understood that people may be taking vacations during that time, everyone needs to be honest about the level of commitment that they can give to Sistership. Look at the upcoming year and take into account any medical procedures, health concerns, and family or work responsibilities that could prevent you from meeting your paddling commitment. Please consider anything that could affect your ability to train, on or off the water, for any length of time during the season (mid-February – September). Consider your health today. When the paddling season starts could you **SAFELY** get into a boat and paddle? If not, and the problem cannot be corrected by dry land training, **PLEASE** do not sign up for active paddling. This is a difficult decision to make, but it is imperative that everyone takes the request seriously if we are to have stable, cohesive crews. If circumstances change, let the Registrar know and everything possible will be done to accommodate these changes within the guidelines of our criteria.

The Calgary festival traditionally takes place in August and attendance is expected. Dates will be confirmed at a later date.

Thank you everyone for your time and enthusiasm as you consider the 2015 dragon boat season.

Looking forward to another great year for Sistership.

Paddles Up!



Sistership Dragon Boat Association

Mission Statement

The Sistership Dragon Boat Association provides opportunities, through the sport of dragon boating, for people diagnosed with breast cancer to foster wellness and partner with the community to heighten the profile and importance of breast health.

As a member of the Sistership dragon boat team, please recognize that your commitment impacts each and every team member. Successful teams embrace personal responsibility and encourage ownership of goals and expectations. Sistership asks that each member prepares adequately for paddling and performs to the best of her ability. This includes participating in a seasonal fitness training program and committing to practices designated by team members and coaches. It is important that each team member commit to committee work and other programs that contribute to our community.

*"Everything you are, or ever will be, is completely up to you."
Anonymous*

SISTERSHIP 2015 REGISTRATION FORM

Name _____ Birth Date _____
Day/Month/Year

Address _____

City _____ Postal Code _____

Contact Numbers Home _____ Work _____ Cell _____

E-Mail Address _____

Are you prepared to commit to paddling twice a week? _____

Years Paddled/Paddling Side _____

It is mandatory for all members to actively participate on one of the following committees:
Please indicate your choices below (1 to 6), with your first choice being one (1).

_____ Venue Planning

_____ Operations

_____ Fundraising

_____ New Members

_____ Event Planning

_____ Community Relations

Medical Information - The information being collected on the Pre-Season Health Questionnaire and Par-Q & You is required for use by your designated trainer, coach, and physiotherapist. It will also be given to the land manager or team captain at festivals, where it will be kept in a sealed package and only used in case of a medical emergency. Beyond this, everything will be kept confidential. Authorization for release of this information, as described above, is required by all active paddlers and is indicated by your signature below.

Signature _____ Date _____

Please return completed forms with payment by **January 3, 2015**. The paddling registration fee is \$125.00, the membership fee is \$20 (if not already paid at AGM), and the equipment deposit cheque is \$350.00. **Please do not date the equipment deposit cheque, instead initial the date space.** The fees may be paid by cash or cheque, or by four postdated cheques dated January, February, March, and April. Please make cheques payable to Sistership Dragon Boat Association.

Mail to: Sistership Dragon Boat Association
c/o 724 Sacramento Place SW
Calgary, Alberta T2W 0R5

PRE-SEASON HEALTH QUESTIONNAIRE

The following information will be made available to your designated trainer, coach, and physiotherapist. It will also be given to the land manager or team captain at festivals, where it will be kept in a sealed package and only used in case of a medical emergency. Beyond this, everything will be kept confidential. It will be used only to optimize your training and ensure your safety both in the gym and on the water. Both the Pre-Season Health Questionnaire and Par-Q & You forms **must** be returned as part of your registration package. **You will be responsible for monitoring your own health throughout the 2015 dragon boat season and are strongly encouraged to communicate any changes in your condition.**

1. Paddler's Information

Name _____

Phone # _____ Email _____

Name of Family Physician _____ Phone # _____

Emergency Contact Name _____

Phone Number(s) _____ Relationship _____

Alberta Health Care Number _____

2. Please provide the following information on any physical, allergies, or medical conditions

Check here if you are *not* taking any medications

Medical Conditions or Allergies	Name/Dosage/Frequency of Medication	Comment(s)

3. Have you experienced any major changes in your health during or since the 2014 paddling season?

No Yes (explain below) Not Applicable (i.e. new member)

4. Do you have any health concerns that you would like addressed prior to beginning the 2015 dry land training or paddling season?

No Yes (explain below)

PAR-Q & YOU

(A Questionnaire for People Aged 15 to 69)

Regular physical activity is fun and healthy, and increasingly more people are starting to become more active every day. Being more active is very safe for most people. However, some people should check with their doctor before they start becoming much more physically active.

If you are planning to become much more physically active than you are now, start by answering the seven questions in the box below. If you are between the ages of 15 and 69, the PAR-Q will tell you if you should check with your doctor before you start. If you are over 69 years of age, and you are not used to being very active, check with your doctor.

Common sense is your best guide when you answer these questions. Please read the questions carefully and answer each one honestly: check YES or NO.

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	1. Has your doctor ever said that you have a heart condition <u>and</u> that you should only do physical activity recommended by a doctor?
<input type="checkbox"/>	<input type="checkbox"/>	2. Do you feel pain in your chest when you do physical activity?
<input type="checkbox"/>	<input type="checkbox"/>	3. In the past month, have you had chest pain when you were not doing physical activity?
<input type="checkbox"/>	<input type="checkbox"/>	4. Do you lose your balance because of dizziness or do you ever lose consciousness?
<input type="checkbox"/>	<input type="checkbox"/>	5. Do you have a bone or joint problem (for example, back, knee or hip) that could be made worse by a change in your physical activity?
<input type="checkbox"/>	<input type="checkbox"/>	6. Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?
<input type="checkbox"/>	<input type="checkbox"/>	7. Do you know of <u>any other reason</u> why you should not do physical activity?

If
you
answered

YES to one or more questions

Talk with your doctor by phone or in person BEFORE you start becoming much more physically active or BEFORE you have a fitness appraisal. Tell your doctor about the PAR-Q and which questions you answered YES.

- You may be able to do any activity you want — as long as you start slowly and build up gradually. Or, you may need to restrict your activities to those which are safe for you. Talk with your doctor about the kinds of activities you wish to participate in and follow his/her advice.
- Find out which community programs are safe and helpful for you.

NO to all questions

If you answered NO honestly to all PAR-Q questions, you can be reasonably sure that you can:

- start becoming much more physically active — begin slowly and build up gradually. This is the safest and easiest way to go.
- take part in a fitness appraisal — this is an excellent way to determine your basic fitness so that you can plan the best way for you to live actively. It is also highly recommended that you have your blood pressure evaluated. If your reading is over 144/94, talk with your doctor before you start becoming much more physically active.

DELAY BECOMING MUCH MORE ACTIVE:

- if you are not feeling well because of a temporary illness such as a cold or a fever — wait until you feel better; or
- if you are or may be pregnant — talk to your doctor before you start becoming more active.

PLEASE NOTE: If your health changes so that you then answer YES to any of the above questions, tell your fitness or health professional. Ask whether you should change your physical activity plan.

Informed Use of the PAR-Q: The Canadian Society for Exercise Physiology, Health Canada, and their agents assume no liability for persons who undertake physical activity, and if in doubt after completing this questionnaire, consult your doctor prior to physical activity.

No changes permitted. You are encouraged to photocopy the PAR-Q but only if you use the entire form.

NOTE: If the PAR-Q is being given to a person before he or she participates in a physical activity program or a fitness appraisal, this section may be used for legal or administrative purposes.

"I have read, understood and completed this questionnaire. Any questions I had were answered to my full satisfaction."

NAME _____

SIGNATURE _____

DATE _____

SIGNATURE OF PARENT
or GUARDIAN (for participants under the age of majority) _____

WITNESS _____

Note: This physical activity clearance is valid for a maximum of 12 months from the date it is completed and becomes invalid if your condition changes so that you would answer YES to any of the seven questions.

**SISTERSHIP DRAGON BOAT ASSOCIATION
WAIVER OF LIABILITY AND RELEASE CLAIMS**

Please Read Carefully

TO: SISTERSHIP DRAGON BOAT ASSOCIATION

The undersigned understands that paddling on lakes, reservoirs, and rivers involves certain dangers, not all of which can be listed herein. Among the more obvious and frequent are:

1. Exposure to variable extremes in weather that may cause injury due to heat or cold, and which may prevent or force route and itinerary changes.
2. Contact with and possible immersion in cold water for undetermined periods, leading to hypothermia and possible suffocation.
3. Exposure to capsizing and sinking, trees, rocks, bridge abutments, log jams, rope entanglement, current patterns and other possible sources of "in water" injury and entrapment.
4. Unfamiliar terrain and routes where dragon boats could be separated from the party.
5. Transport of public or private motor vehicle.
6. Travel in remote locations with poor communications and inability to get rescue or medical assistance easily or quickly.

The undersigned agrees to this waiver of liability and release of claims in respect to Sistership Dragon Boat Association, its officers and directors, employees, agents, volunteers, members or managers, contractors, sponsors and sponsor representatives.

The undersigned accepts all of the risks and possibility of death, personal injury, property damage and loss resulting from participation in practice sessions, dragon boat festivals and other events that are organized by the Sistership Dragon Boat Association. Further the undersigned releases Sistership Dragon Boat Association, its offices and directors, employees, coaches, trainers, volunteers, managers and contractors from any and all liability for any personal injury, death, property danger or loss that may occur as a result of participating in the activities of Sistership Dragon Boat Association.

The undersigned confirms they are physically fit and capable to participate in the activities of Sistership Dragon Boat Association and have no medical conditions or needs other than those detailed in registration data.

The undersigned confirms they are comfortable in the water and they are willing to partake in safety testing prior to the paddling season.

The undersigned confirms they are at least 18 years of age, being the legal age of majority in the Province of Alberta.

By signing this Waiver, the undersigned confirms they have read and understood the contents and will be bound by same, including the signatory's heirs, next of kin, personal representatives and assigns.

The undersigned acknowledges that representatives of the Sistership Dragon Boat Association have been available to fully explain the various hazards and risks associated with the activities of the Sistership Dragon Boat Association.

The laws of the Province of Alberta govern this waiver of liability and release claims and are enforceable in any court of law.

Signed this _____ day of _____, 20____, at the City of _____, in the Province of Alberta.

Signature of Participant

Witness

Printed name of Participant

Printed name of Witness

Members' Pledge

As a member of Sistership Dragon Boat Association, I recognize the importance of giving my full support to the Board and its elected Directors. I pledge to give this support.

I confirm the right of each member of Sistership to have her own opinion. I affirm that I will abide by the decisions of the Board whether I agree with them or not.

I realize that the Board cannot consider my opinions if I do not express them.
I also accept that every idea cannot be used and the decisions of the Board must be followed.

I will treat the Board, the coach, and other members of Sistership with respect and understanding.

I will take responsibility for acting professionally and will be accountable for all of my actions.

I will value and respect the policies and procedures of the organization.

I promise to support Sistership to the best of my ability and I will strive to have a positive impact on the organization.

Signed _____

Date _____