

Coach John C Crilly 732-233-9300 navesinkindoorrowing@gmail.com

Checks payable to "Navesink Indoor Rowing"

**Navesink Indoor Rowing 2018/2019 Winter Season
PO Box 7947
Shrewsbury, NJ 07702**

Rower's Last Name _____ First _____ DOB _____ Age _____ Grade _____

Parents' names _____

Address/city/state/zip _____

Home phone _____ Mobile phone _____

REQUIRED please PRINT your email and parents' email _____

School _____ Shirt size _____

GREEN(Beginner) 4-5pm Mon and Fri \$ 375 _____

BLUE (Experienced) 5 - 6:30pm M W F ; 6:30am Sun \$ 545 _____

GOLD (Experienced) 6:30 - 8pm M W F ; 6:30am Sun \$ 545 _____

Lifting (6 weeks - coach approved) 8-9 Sundays ; 3:45-4:45 Tues \$149 pay to "Monmouth CrossFit" separately

TOTAL _____

Make checks payable to "Navesink Indoor Rowing"

To be completed by coach:

Green Blue Gold Baseline 2k _____