



WT WOODSON CREW - RULES OF CONDUCT 2023

ROWER NAME: _____

EVENTS:

- 1) STOTESBURY REGATTA, Philadelphia, PA, May 18-20
- 2) SRAA NATIONAL CHAMPIONSHIP REGATTA, Oak Ridge TN, May 25-27

STUDENT ACKNOWLEDGEMENT

I have received and signed the current [FCPS Student Rights & Responsibilities](#). In addition, I understand and agree to abide by the following:

1. I will be respectful of everyone involved with this trip and listen to my coaches.
2. I will represent WT Woodson HS in a dignified and professional manner (no profanity)
3. I will travel in buddy pairs at all times and check in with my boat parents.
4. I will not leave the hotel except to travel to the river with my boat.
5. I will not leave my room after 9:00 pm.
6. I will abide by all rules of the trip and understand that I will be sent home at my parent's expense for disciplinary reasons.
7. I realize that the inspection of luggage, backpacks, coolers, and of my possessions for illegal substances will be done prior to boarding the buses for the trip. This inspection is required by FCPS policy for all student participants.

STUDENT SIGNATURE _____ **DATE** _____

STUDENT CELL PHONE _____

If you don't have a cell phone, please write "NONE" on the line above. Thank you.



WT WOODSON CREW - RULES OF CONDUCT 2023

ROWER NAME: _____

EVENTS:

- 1) STOTESBURY REGATTA, Philadelphia, PA, May 18-20
- 2) SRAA NATIONAL CHAMPIONSHIP REGATTA, Oak Ridge TN, May 25-27

PARENT ACKNOWLEDGMENT AND PERMISSION

I/We have or will provide a signed FCPS Parental Authorization and Acknowledgement of Risk For Field Trip ([FS-152](#)) in association with the events listed above. I/We agree to abide by any rules set forth by the team and understand the following:

1. I/We give our permission for our student athlete to take part in this trip.
2. I/We will abide by all trip rules set forth here and with the FCPS Participation Policy Agreement.
3. I/We approve the inspection of our student athlete's luggage, backpacks, coolers, and other personal possessions for illegal substances, as required by FCPS policy.
4. I/We understand that the trip will involve activities off of school property and will not hold FCPS, FCPS employees, the WTW Crew Board or WTW Crew Coaches responsible for the condition of non-school or non-WTW Crew property.
5. In the event of trip-cancellation, I/we understand that we may not receive a refund for any or all trip expenses.

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____

PARENT/GUARDIAN PRINTED NAME _____

PRIMARY PHONE: _____

Can you receive texts at this number (please circle one)? YES or NO?

ALTERNATE PHONE: _____

Can you receive texts at this number (please circle one)? YES or NO?

E-MAIL(S): _____