



USRowing Junior Lightweight Clearance Form

Primary Care Provider:

USRowing is committed to safe participation in weight-restricted (lightweight) events for high school athletes, such that no high school rower engages in harmful weight-loss behaviors. Your patient desires to be cleared for lightweight participation for the upcoming spring rowing season. This form asks you to confirm that this athlete's NATURAL weight is likely to be under the weight limits below for this season.

Females – 130 pounds

Males – 150 pounds

Name _____

DOB _____

Date of last measurement (must be January 1 - February 29, 2020) _____

Height _____ CDC Growth Chart Percentile _____

Weight _____ CDC Growth Chart Percentile _____

CDC growth chart weight percentile for the past three years.

Date _____ Weight percentile _____

Date _____ Weight Percentile _____

Date _____ Weight percentile _____

CDC Growth chart calculator link: <https://peditools.org/growthpedi/>

I certify that the athlete named above is naturally under the lightweight rower weight limit (130 lbs. for females, 150 lbs. for males), is likely to remain under the weight limit for this spring season ending June 15, 2020, based on his/her growth velocity and current weight, and is able to compete as a lightweight rower for this season.

Signature _____ Date _____

Print Name _____

Office address _____

Phone _____

Email _____

Fax _____



USRowing Junior Lightweight Athlete and Parent Release

Dear Parent/Caregiver

USRowing is committed to safe participation in weight-restricted (lightweight) events for high school athletes, such that no high school rower engages in harmful weight-loss behaviors. Your son/daughter desires to be cleared for lightweight participation for the upcoming spring rowing season. This form asks you to confirm this athlete’s eligibility to participate in lightweight rowing events based on NATURAL weight is likely to be under the weight limits below for this season and that you have reviewed USRowing’s policies (insert link). You further acknowledge that, as a condition of your son/daughter’s participation in lightweight rowing for the upcoming spring season, you and your son/daughter must consent to the completion of the attached USRowing Junior Lightweight Clearance Form by your son/daughter’s primary care physician and submit the completed form to USRowing.

Females – 130 pounds

Males – 150 pounds

Name _____

DOB _____

USRowing Membership Number _____

Athlete

Signature _____ Date _____

Print Name _____

To be completed by Athlete

I certify that I am naturally under the lightweight rower weight limit (130 lbs. for females, 150 lbs. for males) for this spring season ending June 15, 2020, and have reviewed USRowing’s policies (insert link). I acknowledge that, as a condition of my participation in lightweight rowing for the upcoming spring season, I must consent to the completion of the attached USRowing Junior Lightweight Clearance Form by my primary care physician and submit the completed form to USRowing.

I confirm that I will compete in lightweight events this season:

Signature _____ Date _____

Print Name _____