Bylaws Iowa Whitewater Coalition Inc

ARTICLE I: NAME

The name of this organization shall be Iowa Whitewater Coalition Inc. (IWC)

ARTICLE II: PURPOSE

The purpose of this organization is "to protect, support and improve the whitewater resources and water trails by reconnecting the rivers throughout lowa."

ARTICLE III: MEMBERSHIP

SECTION 1: Members are any person 18 years and older who have paid dues for the current calendar year. Membership and/or outing participation can be revoked by a 2/3 decision of board members if members exhibit unsafe or otherwise inappropriate behavior.

SECTION 2: Members who participate on IWC trips are required to sign a liability waiver, or will not be allowed to participate.

ARTICLE IV: OFFICERS AND BOARD OF DIRECTORS

SECTION 1: The officers of the club shall be President, Vice President, Secretary, Treasurer, and Safety Chair.

SECTION 2: The board of directors shall consist of the above officers, past president, and at least three additional members. Vacancies of officers or board members will be filled with 2/3 vote of approval by all current board members.

SECTION 3: DUTIES OF OFFICERS AND BOARD OF DIRECTORS

President. The president shall preside at all IWC meetings, shall be chair of the Board of Directors, and advisory member of all committees, shall see that all standing committee chairpersons are appointed, and shall perform all other duties usually pertaining to this office. The President is (or may assign a member to be) the club representative to national paddling organizations with which the club is affiliated.

Vice President. The Vice President shall act as an aide to the President and shall preside in the absence of the president.

Secretary. The Secretary shall keep a correct record of all meetings of the club and of the Executive Board, shall be responsible for all official correspondence of IWC, and shall perform any other duties normally pertaining to the office. The Secretary shall be keeper of all official Club records.

Treasurer. The Treasurer shall receive all monies, shall keep an accurate account of all receipts and expenditures, shall pay out funds only as authorized

by the Board of Directors, and shall submit regular reports to the Executive Board and an audited annual report.

Safety Chair. The Safety Chair shall collect resource materials and ensure that any safety training for members is appropriate and adequate and that training is monitored as outlined in Article VIII. The Safety Chair will be responsible for approving or vetoing outings and outing organizer.

Board Members. All board members will attend meetings and otherwise support the activities of the Iowa Whitewater Coalition.

ARTICLE V: ELECTION AND TERM OF OFFICE

The five executive officers (President, Vice President, Treasurer, Secretary, and Safety Chair) are elected to two-year terms at the annual meeting by paid members in attendance. Nominations for officers can be made by any IWC member (including self-nominations) at the annual meeting, or in absentia by notifying the IWC secretary in advance of the annual meeting. Officers will appoint remaining board members by majority vote to three-year terms. The total number of board members, including executive officers, is not to exceed nine.

ARTICLE VI: MEETINGS

SECTION 1: The annual meeting shall be held during the winter, between Nov. 1 and Feb. 28, with meeting date and time announced 60 days in advance. Planning of the coming season's boating trips, strategies toward fulfilling the organization's goals, and various activities shall be on the agenda.

SECTION 2: Board meetings shall be held periodically throughout the year, as often as necessary to fulfill the club's business. All members can attend board meetings.

ARTICLE VII: AMENDMENTS TO THE BYLAWS

These bylaws may be amended, altered, or repealed at any club meeting with a two-thirds 2/3 vote of IWC members present at a meeting called for this purpose. Notice of proposed change(s) must be provided in writing to members at least two weeks in advance of the meeting.

ARTICLE VIII: COMMITTEES

As the need arises to accomplish a goal such as but not limited to membership drives or fundraising, the board will establish a committee of members. In addition, one standing committee will be permanent:

Safety Committee. The Safety Committee will encourage and promote development and use of paddling safety standards, and practices, and promote awareness of safety issues. It will:

- Establish policy and have the final jurisdiction on safety matters for the Coalition.
- Encourage basic and advanced on-water safety training.

- Encourage training in CPR and First Aid.
- Develop and distribute materials concerning water safety.
- Collect lowa data of water-related accidents and fatalities and analyze such in a manner productive to the development of guidelines for water safety conditions, and report data to national organizations.
- Cooperate with other organizations in matters of water safety.
- Act as the enforcement board for the established policy of the Association that all members will abide by the American Whitewater Affiliation Safety Code. Any and all violations of this Code will be referred to the Board of Directors which can take actions as describe in Article III.
- The safety committee will ensure that outings are organized around a specific itinerary, equipment list, and skill level. Any deviation needs to be a consensus of the group, with the outing organizer's vote being 50% of the total.

ARTICLE IX: DISSOLUTION

IWC may be dissolved at any regular meeting of the Club by a two-thirds (2/3) vote of the members present and voting by proxy at a duly called meeting. Upon such a dissolution, members present will voted on disposal of IWC's remaining access to a paddling-related organization.

ARTICLE X: THE WAIVER See final page.



| Part A: Release from Liability |
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| In consideration of my membership in the Iowa Whitewater Coalition, Inc. |
| I,, hereby agree as follows: |
| 1. I fully understand that the Iowa Whitewater Coalition, Inc. is a democratic, non-profit |
| organization of equals engaged in whitewater paddling and reconnecting the rivers in |
| central Iowa for the mutual benefit of all participants; |
| 2. I understand that the Iowa Whitewater Coalition, Inc. does not lead, nor contract to |
| take myself, nor any other person, on trips; 3. I recognize the inherent risks involved with river trips and outdoor activities, including |
| the risks of capsize, collision, drowning, injury to body and damage or loss of |
| equipment. |
| 4. I agree that I will not, in any way, hold the trip organizers, other participants |
| members, executive or directors of the Iowa Whitewater Coalition, Inc. liable for any |
| claims or demands for damages or injuries or losses of any nature or kind to me or my |
| property, which is also binding upon my successors, executors or heirs arising out of my |
| participation in Iowa Whitewater Coalition, Inc. activities; |
| 5. I am responsible for any medical or rescue expenses incurred by my participation in |
| Iowa Whitewater Coalition, Inc. activities; |
| 6. As a parent or guardian of a child under 18 years of age, I will accompany and |
| responsibly supervise that child while they are engaged in Iowa Whitewater Coalition |
| Inc. activity, and will accept responsibility for them; |
| 7. I am responsible for informing fellow participants/organizers of any and all medica |
| conditions that would affect or compromise my ability to engage in Iowa Whitewater, |
| Coalition, Inc. activities; and |
| 8. I acknowledge that I have read the above and fully understand the nature and consequences of granting my consent and agree to hold Iowa Whitewater Coalition, Inc. |
| harmless for any and all claims for liability of damages against the trip organizers, other |
| participants, members, executive or directors of the Iowa Whitewater Coalition, Inc. |
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| Dated at the day of, 200 |
| Signed: Witness:* |
| *Signature of parent or guardian required if under 18 years of age. |
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| Part B: Emergency contact information (print clearly) |
| Name: |
| Address: |
| City: State Zip Code |
| e-mail: |
| Phone: |
| Experience, including number of years and any canoeing or kayaking schools: |
| Emergency contact: Telephone number |
| Medical provider: |
| Address: Telephone number: |