



Saltire Yacht Club 2017 Sailing Lessons Registration

Student Information

Last Name: _____

First Name: _____

DOB (MM/DD/YYYY): ____/____/____

Saltire Address: _____

Saltire Phone: _____

Years Sailing _____

Allergies/Medical: _____

Notes: _____

Payment Information

Beginning date (MM/DD): ____/____

Season () \$360.00 Four Weeks () \$240.00 Two Weeks () \$180.00

Paid by: Check () Cash () Submitted with annual dues ()

Primary emergency contact:

Name: _____

Saltire Number: _____

Cell: _____

Email: _____

Secondary emergency contact:

Name: _____

Saltire Number: _____

Cell: _____

Email: _____



Saltaire Yacht Club Youth Sailing Consent and Waiver

For participants in Saltaire Yacht Club youth sailing programs, this Waiver must be read and signed by the parent or guardian of any participant prior to their being admitted to participate.

I hereby give permission for the below named child to participate in activities of the Saltaire Yacht Club, including transportation to and from events. I understand that my child must pass any test necessary to participate in a program.

I understand that there are risks inherent in water-based and land-based activities and that accidents can occur during any Saltaire Yacht Club activity. Any such accident can result in injury or death.

For my child, myself, my family, heirs and assigns, and our representatives, I knowingly and freely waive all claims against and release and discharge Saltaire Yacht Club and its officers, directors, employees, agents and volunteers from any and all liability, loss, damage and expenses that may result from participation in Saltaire Yacht Club activities, to the fullest extent permitted by law.

I HAVE CAREFULLY READ THIS WAIVER AND RELEASE OF LIABILITY. I FULLY UNDERSTAND ITS CONTENTS AND AGREE TO ITS TERMS. I have been given the opportunity to seek legal counsel prior to signing this agreement.

Child:

Name: _____

Parent/Guardian

Name: _____

Home Address _____

Signature _____

Date (MM/DD/YYYY) ____/____/____