



SYC Adult Sailing Program Application 2017



Please fill out a separate application for each person. Payment may be combined. Sessions will be filled on a first come/first served basis. Open to ages 16+. Class size: Maximum - 5, Minimum - 3.

Please print clearly.

Name (Student) _____ Phone _____

Address _____ Town _____ Zip _____

Email address _____ Cell Phone _____

I would like to be called _____

Emergency Contact _____ Phone _____

How did you hear about the Sailing Program? _____



____ **Spring *MOTHERS & OTHERS*** May 30 – June 16 (9:00 AM - 11:00 AM)

Orientation May 30 – June 2 (9:00 AM-11:30 AM) Pick one day _____

Sailing days June 5 - June 16 (9:00 AM-11:00 AM) Pick 4 week days _____

(June 19-22 are being saved for makeup days)

____ **SUMMER EVENING ADULT LEARN TO SAIL (or Learn to Sail Better)** June 19 - July 27

Sunday Orientation (3:00 PM - 5:30 PM) Select 1: June 19 June 26 July 3 July 10

Sailing days: (6:00 PM - 8:00 PM) Mondays, Tuesdays & Wednesdays (no Thursday or Fridays)

Select 4 dates _____

____ **Fall *MOTHERS & OTHERS*** Sept. 5 – Sept. 22

Orientation Sept. 5 – Sept 8 (9:00 AM-11:30 AM) Pick one day _____

Sailing days Sept. 11 – Sept 22 (9:00 AM-11:00 AM) Pick 4 week days _____

(Sept 25-Sept 27 are being saved for makeup days)

You may be asked to change days when there are not at least 3 people signed up for that particular day.



Program Fee

Payment

\$250.00* all Adult programs

Total enclosed \$ _____

*\$50 /day for additional days

Please make check payable to: **Sherborn Yacht Club, Inc.**

Liability Release:

I hereby assume all risk and hazards incidental to participation in any and all SYC activities during the current season. I hereby waive, release, absolve, indemnify and agree to hold harmless the Sherborn Yacht Club, its directors, officers, agents, servants and participants from all liability of any sort for any accident or injury sustained by me or my child while participating in your program. I understand payment is not refundable.

Signed _____ Date _____

(Parent or Guardian if student is a minor)