



West Vancouver YC One Day Sailing Student Registration Form

Participant's Name: _____ School Team: _____

Address: _____

City: _____ Prov.: _____ P/C: _____ Birth date (dd/mm/yy): ____/____/____

Prior level achieved or previous sailing experience (NOTE: **experience is *not* necessary!**): _____

Contact Information:

Guardian Name: _____ Home Phone: _____

Other phone (cell or work): _____ Guardian or participant e-mail: _____

Medical Information:

Doctor: _____ Phone: _____ Medical Number: _____

(if out of province, please state where)

Students must be able to swim with or without a life jacket. Please indicate any health condition or disability the instructing staff should be aware of (Confidential): _____

Emergency Contact:

Name: _____ Phone: _____ Relationship: _____

You will need to bring appropriate clothing for the weather. Note temperatures on the water are often cooler than on land. Bring a change of clothes and rubber-soled shoes that can get wet. Hat and sunscreen are recommended. Also bring your own MOT approved lifejacket if you have one, otherwise WVYC can provide one.

RELEASE FORM: Participants are under the jurisdiction of the Sailing Director and Coach(es) and infractions of West Vancouver Yacht Club rules or breaches of discipline will result in dismissal from the course. The undersigned, in consideration of the acceptance of the application, hereby releases West Vancouver Yacht Club, its officers, directors, members, servants and agents and each of them of and from all claims, damages or causes of action by the undersigned or any other person, arising or resulting in any way from the participation of the applicant in the program whether caused by the negligence of those persons hereby released or otherwise.

Parent or Guardian Signature: _____ Date: _____