

## SAILING SCHOOL/CLUB TRAINING

SEASON: \_\_\_\_\_

Period		Level	
September School holiday program	<input type="checkbox"/>	Learn to Sail	<input type="checkbox"/>
Pre Christmas program	<input type="checkbox"/>	Intermediate Optimist	<input type="checkbox"/>
Post Christmas program	<input type="checkbox"/>	Advanced Optimist	<input type="checkbox"/>
		Open Fleet	<input type="checkbox"/>

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

DOB: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**All registrants must complete the Parental Consent (if participant under 18), Health Information Sheet, and Media Consent forms**

It is a requirement for this Sailing School that the participant can swim and tread water.

### Indemnity

In consideration of the organizers accepting this registration, I hereby indemnify and agree at all times hereafter to keep effectively indemnified the organisers and/or any person acting for it or on its behalf in or about the conduct of Dinghy Sailing or in any way in connection therewith together with any person participating therein (the Indemnified) against any and all demands, suits, actions and other claims of every description and nature which my said child or any person claiming through him/her but for this indemnity might otherwise have whatever nature arising from or in connection with any activity of the organizers during the period of the event.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 2015.

Signature: \_\_\_\_\_  
(Parent/Guardian if skipper under 18)

Name: \_\_\_\_\_

Office Use Only

Paid \$ \_\_\_\_\_ Date Paid: \_\_\_\_\_