

Coronado Yacht Club Junior Program

2010 SUMMER SAILING APPLICATION

Please fill out the following information and check the box(es) for the class(es) you would like your child(ren) to participate in.

Space is limited and reservation is "confirmed" with payment only.
CYC Members sign-up start March 15th and Non Members April 1st

Sailor's Name _____ Home Phone _____

Birth Date _____ Current Grade _____ T-shirt: Child Large Adult Small Medium Large Xlarge

Address _____ Age _____

City _____ State _____ Zip _____

Mom's Name _____ Work # _____ Cell # _____

Dad's Name _____ Work # _____ Cell # _____

Email _____ Email _____

Members:		Non-Members:		Boat Charter:		DO NOT FILL IN THIS AREA – JR. OFFICE ONLY			
Session 1 \$325		Session 1 \$375		\$50 per session for Sabot					
Session 2 \$325		Session 2 \$375		\$75 per session for					
Session 3 \$325		Session 3 \$375		Laser/420s					
CLASSES		AGE	SESSION I Jun 14-Jun 30	SESSION II Jul 6– Jul 22	SESSION III Jul 26- Aug 12	Members Class	Non-Mem Class	Boat Charter	Total
Morning Classes 9:30-12:30	Bronze Sabot learn to sail	8-12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
	Silver Sabot intermediate	8-12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
	Sabot Gold/ C3 Starting to race	9-12	<input type="checkbox"/>	-	<input type="checkbox"/>				
	Junior Advanced/ Laser	11-14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Afternoon Classes 1:30-4:30	Bronze Sabot learn to sail	8-12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
	Teen Sailing FJ	11-18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
	Sabot Nationals Race Team Prep & Regatta	9-up	-	<input type="checkbox"/>	<input type="checkbox"/>				
	Teen Racing 420s / Nationals Spinnaker/Trapeze	11-18	<input type="checkbox"/>	<input type="checkbox"/>					
	Teen Racing 29er Jr. Olympic/ Nationals	14-18	<input type="checkbox"/>	<input type="checkbox"/>					
There is a \$75 extra charge for race team classes for coaching at regattas for each session or \$25 a day									

Boat charter fees are in addition to class fees. Students not providing their own boat must charter a boat for each session.

Every sailor must provide a "coastguard approved lifejacket" for every class.

A 10% Multi-class discount on class fees will be applied for each additional class per sailor enrolled
No refunds after classes have started. 25% processing fee if cancelled within 7 days before class starts.

"A few Scholarships are available for first time sailors"

All sailors will take a swimming test on the first day of class in the bay!

Charge my CYC Account #
Signature
Check #
Cash

Visa/MC payments must be made "IN PERSON ONLY".

	Due	Paid	Balance
Class (es)			
Charter(s)			
Total			

PHOTO PERMISSION RELEASE FORM

I, _____, grant permission to Coronado Yacht Club (CYC) and Coronado
(please print YOUR name)

Club Junior Program to use my likeness, photographic image and my name in its promotional and publicity collateral and/or internal communications materials free of charge. I also grant permission to CYC and CYC Junior Program to use the likeness(es), photographic image(s) and the name(s) of

(print name(s) of CHILD/CHILDREN)

for the same purposes free of charge. I do not limit this use to conclude at a specific time or date. It is understood by me, CYC and Coronado Yacht Club Junior Program that these items shall be used in a professional and positive manner.

Parent Signature

Date

SIGN UP BY MAIL OR IN PERSON

CYC Member Priority Sign-Up
Monday, March 15th to Wednesday, March 31st
Office is open Monday - Friday 9:30 to 4:00
Enrollment Open to the Public Starts
Thursday, April 1st

Scholarships are available for more info contact the Jr. Office.

All other sign-ups must be arranged with the Jr. Program Office.

If you have any questions, you can contact the Jr. Program Office at
619-435-0522 or send an email to jroffice@coronadoyc.org.

**SAN DIEGO AREA YACHT CLUB'S JUNIOR ACTIVITIES
Parent's Consent and Waiver of Liability/Assumption of Risk-Indemnity Agreement**

The undersigned parents or legal guardians (hereafter referred to in the singular) of _____ (herein referred to as the *child*) request that the child be allowed to participate at any SDAYC in any junior activity (herein referred as the "activities"). This agreement shall remain in effect until the SDAYC Committee receives written notice of the cancellation of the consent or until the end of the activities described above. In return for the child being permitted to take part in the activities and to use the facilities and property of any SDAYC each of us makes the following promises and warrants the truth of the following facts:

1. I am familiar with the programs included in the activities, and I understand officers and employees of any SDAYC are available to discuss the activities if I should with additional information. I also understand I am solely responsible for the arrival and departure of my child at the beginning and end of each day's activity. I will not allow my child to remain on the premises of any SDAYC club after each day's program without appropriate supervision of the written permission of the Yacht Club. I agree SDAYC will have no responsibility for the supervision of my child at times other than during the scheduled activities. I will infer my child that he/she is expected to cooperate with, and follow the directions of, the persons in charge of the activities and to act in a manner consistent with the spirit of good sportsmanship and respect for the rights of others.
2. My child is in good health, and I know of no reason why he/she would be incapable of participating in the activities. My child knows how to swim. I will immediately notify the designated SDAYC supervisor, if a change in my child's health of other condition would affect my child's ability to participate in the activities.
3. WAIVER OF LIABILITY: I waive and release any right I, my heirs, distributes, guardians, legal representatives and assigns may have of acquire to make a claim against, sue, attach the property of or prosecute any SDAYC or any of its members, directors, officers, agents, employees and affiliated organizations (herein referred to as "the releases") for monetary damages caused by injury to my child of damage to the property of my child or myself arising from my child's participation in the activities and use of the facilities and property of any SDAYC, including the use of photographs and the name of my child involving such activities and use, whether or not the injury of damage results from the negligence or other action, except intentional acts, of the releases. (Please initial to indicate you have read this paragraph _____)
4. ASSUMPTION OF RISK: I am aware that the activities may involve maneuvering a boat, sailboard or other watercraft of deep waters in potentially hazardous conditions which may include, among other things, strong winds and high waves, sudden and unexpected immersion in deep waters and collision with other watercraft of stationary objects such as docks, pilings, and buoys. With knowledge of the dangers involved, I voluntarily ask that my child be allowed to take part in the activities. I accept any and all risks to myself and my child of injury, death and property damage arising from participation in the activities and the use of the facilities and property of any SDAYC, whether or not caused by the negligence or other action, except intentional acts, of any of the releases. (Please initial to indicate you have read this paragraph _____)
5. INDEMNITY AGREEMENT: I agree to indemnify and hold the releases harmless from any loss, liability, damage or cost, including reasonable attorneys fee, that may incur due to my child's participation in the activities and use whether or not such loss, liability, damage or cost results from the negligence or other action, except intentional acts, of any of the releases. (Please initial to indicate you have read this paragraph _____)

I have carefully read this agreement and fully understand its contents. I am aware the agreements includes a waiver of liability, an assumption of risk, and an agreement by me to indemnify the releases, and I sign it of my own free will.

Date _____ Child's Signature _____ (Print name) _____

Date _____ Parent's Signature _____ (Print name) _____

AUTHORIZATION TO CONSENT TO TREATMENT OF A MINOR

The undersigned parent or guardian of a minor does hereby consent to any emergency x-ray, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special or special supervision of any physician and surgeon licensed under the provision of the Medical Practice Act. It is understood that this authorization is given of any specific diagnosis, treatment, or hospital care being required but is given to provided authority and power on the part of our aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment, or hospital care which the aforementioned physician in the exercise of his best judgment may dean advisable; and neither said agent or any organization involved assumes any financial responsibility for exercising this action.

This authorization is given pursuant to the provisions of Section 25.8 or the Civil Code or California.

1. Family Doctor _____ Phone _____
2. Medical Insurance Provider _____ Phone # _____
3. Persons to contact in an emergency

_____ Relationship _____ Phone _____

_____ Relationship _____ Phone _____

4. Medical Conditions _____

5. Known Allergies _____

6. Current Medications _____