

BYC Junior Sailing Registration Form

Sailors Name _____ Age _____ DOB _____

Parents/Guardian 1 _____ Parent/Guardian 2: _____

Address: _____

Phone: _____ Email: _____

Address #2 If Applicable _____

Junior Sailor 4 Wk Program _____ 8 Wk Program _____

Fleet {Check one}

Opti Green__ Opti A__ Opti B __ Sunfish__ Laser__ Other__

420 Skipper _____ Crew _____

Sail Number _____ Year's experience _____

Coastal Kid Program Beginner _____ Age _____ Intermediate _____ Age _____

Little Mates Program _____ Age _____

T-shirt size (free with registration)

Youth XS__ Youth SM____ Youth Md__ Youth Lg__ Adult SM____ Adult Md__Adult Lg__

I understand that my sailors' behavior and ability to follow sailing program rules is paramount to the safety of all the sailors. If he/she does not conform to the rules and regulations of the program, he/she may be removed from the program. I will not be entitled to a refund. I agree that Beachwood Yacht Club, its officers, instructors or agents shall not be held liable for any act in connection with said program or activities. I agree to attend one of the mandatory orientation sessions to be held (to be advised) at which time the sailing program rules and procedures will be explained in detail. I understand and accept the conditions if my sailor is not ready to sail with a seaworthy boat and all.

Parent/Guardian Signature _____ Date _____

One registration form per-sailor.

Mail registration form and \$50.00 deposit to:

Mary Ellen Robertshaw 31 Nance Rd West Orange, NJ 07052 to reserve a spot.

Full payment is required by 6/12/2020

If your annual membership and program are paid in full by May 15, 2020 a \$100.00 discount will be applied to the first sailor. (applies to 8 week Junior Sailing program only)