



Sarnia Yacht Club SAIL TRAINING – 2018



Private Adult lessons

General Info	<ul style="list-style-type: none"> • Equipment required: Transport Canada approved lifejacket with attached whistle, close toed shoes. We also suggest change of clothes as you may get wet 								
Authorization	<p><i>I _____ understand That the Sarnia Yacht Club, its executives, membership, employees, agents, and Instructional staff assume no responsibility in the event of any accident or injury to myself named above, or to property of mine while participating in the Sarnia Yacht Club Adult Sailing Program.</i></p> <p><i>I, for the purpose of procuring the Sarnia Yacht Club to consider my participation in the Program, hereby covenant and agree to indemnify and save harmless the Sarnia Yacht Club, its executives, agents, claims, demands, and expenses whatsoever which the Sarnia Yacht Club may incur, sustain, or be under by reason of accident or injury to myself and the property aforesaid.</i></p> <p>Date: M ___ D ___ Y ___ Name : _____ <small style="margin-left: 100px;">(Please print)</small></p> <p style="text-align: center;">Signature: _____</p>								
Student Information	<p>Name: _____ Address: _____ City: _____ Province: _____ Postal Code: _____ E-mail: _____ Phone (H): _____ Phone (W): _____ Health Card No: _____</p> <p>Do you have any health concerns: yes <input type="checkbox"/> no <input type="checkbox"/></p> <p>If yes, please give details below _____ _____</p> <p>Are you taking any medication? <i>(please specify):</i> _____ _____</p> <p>Please note: The health information is important in case of an emergency.</p>								
<p>Course Information: Lynz Jackson – (519) 384 2665 email: sycsst@hotmail.com</p>									
Payment Information	<p>Mail application form with cheque or VISA information to the address below or pay in person at the SYC office. (Post dated cheques will not be accepted)</p> <p>Visa # _____ Expiry _____ Cheque <input type="checkbox"/> Cash <input type="checkbox"/> Visa <input type="checkbox"/></p> <p>Name on VISA (print) _____ Signature _____</p> <p><small>For office use only</small></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; text-align: center;">Date Rec'd</td> <td style="width: 20%;"></td> <td style="width: 20%; text-align: center;">Amount Rec'd</td> <td style="width: 20%;"></td> <td style="width: 20%; text-align: center;">Date Processed</td> <td style="width: 20%;"></td> <td style="width: 20%; text-align: center;">Processed by</td> <td style="width: 20%;"></td> </tr> </table> <p>Sarnia Yacht Club Sailing Training Registration 1220 Fort St., Pt. Edward, ON N7V 1M2 Phone: 519-332-6779 Fax: 519-332-0674</p> <p style="text-align: right;">Website: www.sarniyachtclub.on.ca</p>	Date Rec'd		Amount Rec'd		Date Processed		Processed by	
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