Sailors Name:				
Sea Squirts				
Opti				
Holiday Sailing Reg	gistration Fee	Totals:		
Session 1:	Dec 26-30	\$175/\$225		
Session 2:	Jan 02-06	\$175/\$225		
TOTA	AL DUE			
Daid ho O	la a a l . <i>4</i> 4	Date:	Daid with Condit Cond	
digits)	neck #	_ Date:	Paid with Credit Card :(las	t 4
uigits <i>)</i>				
Refundable Dama	age Deposit	of \$100.00 will be retu	urned or rolled over to your child's ne	xt
class, provided no	damage was	caused to the equipme	nt. Please submit as a separate chec	:k
Paid in Ful	l: \$100.00	Date	Ck #	



## **REGISTRATION FORM**

CHILD'S NAME	CHILD'S AGE
PARENT'S NAME	CHILD'S DATE OF BIRTH
PHONE NUMBER (HOME)	PHONE NUMBER (WORK)
EMERGENCY PHONE NUMBER	EMAIL ADDRESS
COMPLETE MAILING ADDRESS	
	lease list last level and boat class completed)
Is your child currently under a Doctor	's care? If yes, please explain:
ls your child currently taking medicat	ion? If yes, please explain:
CHILD'S DOCTOR'S NAME	TELEPHONE NUMBER
Please list any goals you and your ch	nild share and wish to accomplish through this program.
PARENTAL AUTHORIZATION	



### **CODE OF CONDUCT**

PARENTS: please read and discuss with your child!

The primary mission of this program is to teach youth to sail, race, and develop a lifelong love for the sport. We are committed to making sure that all youth are noticed, cared for and respected. For youth, having fun and feeling safe go hand in hand. Youth feel safe when they know that they will be treated fairly and decently and respected by their peers and their instructors.

Please review, discuss, and sign our Code of Conduct with your child.

- 1. We will treat each other fairly.
- 2. We will help students and instructors when they ask for help.
- 3. We will try to solve disagreements by talking it over ourselves. If we can't we will ask the instructors to help.
- 4. We will take care of the program boats, supplies, and physical property.
- 5. We will sail carefully and safely at all times.

Date	
Date	
	Date Date



### 2016 MINI HOLIDAY SAILING PROGRAM

# DAMAGE DEPOSIT AGREEMENT

Ι,	, participating in	the Junior Sailing Program
sponsored by the	St. Croix Yacht Club, during the year	2016, agree to make a deposit of
\$100.00 toward a	ny and all damages that I may cause	to St. Croix Yacht Club property.
It is understood th	nat any normal wear and tear of the bo	pats and property is excluded
from this agreeme	ent.	
	oix Yacht Club Junior Sailing Program  0 after the sailing class is completed,	
above named sai	·	<b>J</b>
Signature of Stud	ent	_Date
Signature of Guar	rdian	_Date



#### WAIVER, RELEASE, & INDEMNITY AGREEMENT

The undersigned assumes all risk of accident, and agrees that neither the organizing authorities, members, officers, boards of directors, employees or representatives shall be liable, under any circumstances, nor bear any responsibility for any loss of life or injury to persons which may occur, however caused, before, during or after the camp session. The Undersigned hereby voluntary releases, discharges, waives and relinquishes any and all actions or causes of action for personal injury, property damage or wrongful death occurring as a result of engaging in, receiving instructions in said activities, for whatever period said activities or instructions may continue. The St. Croix Yacht Club or any of its officers, agents, servants or employees for any said causes of action, whether or not due in whole or any part to any act, omission or negligence of the St. Croix Yacht Club or any representatives or employee or by any other person, notwithstanding and regardless of the Virgin Islands Comparative Negligence Statute, Title 5, V.I.C. 81451.

The Undersigned acknowledges that he/she has read the foregoing paragraph, and has been fully and completely advised of the potential danger incidental to engaging in the activity and instructing of the St. Croix Yacht Club Junior Sailing Program, and is fully aware of the legal consequences of signing the within instrument.

Signature of Student	Date		
Signature of Guardian	Date		