



Niantic Bay Yacht Club

2010 Junior Sailing Program Registration

Niantic Bay Yacht Club (NBYC) extends an invitation to children between the ages of 8 – 15 to participate in its Junior Sailing Program. Our program focuses on sailing fundamentals. It is designed for the beginner and intermediate sailor and will strive to develop competence and confidence in a safe and fun environment. The program will also meet the needs of those interested in learning more about the competitive aspect of the sport with instruction focused on racing and opportunities to participate in competitive events. The number of days per week/hours per day will depend on the age and sailing experience of each student.

All students will be required to swim 50 meters unaided and must bring and wear a USCG approved PFD (Type III or better) in order to participate in any on-water activities. All students are required to wear a non-marking sole sneaker or sailing footwear. No bare feet or open toe shoes (i.e. flip flops) are permitted at any time.

Full Season Fee: \$565 per student Each additional child in same family: \$465
Monday, June 28 – Wednesday, August 18

1/2 Season Fee: \$325 per student
Monday, June 28 – Friday, July, 23

Fee includes a student membership fee. The student will have use of the facility for sailing lessons and any related activities only. Parents may watch during lessons. There is a Galley at NBYC that serves sandwiches, burgers, and other light fare. Students and parents are welcome to eat at the snack bar after the AM session, prior to the PM session or during other related junior sailing program activities. **Please note that at other times the club facilities may not be used unless you are a guest of a member.**

Students may use their own boat for lessons (Optimist, Blue Jay or 420) and may dry store their boat for no additional storage fee. Families with their own boats may request a one time private lesson with an instructor to ensure comfort with rigging/unrigging and launching/hauling.

Registration and payment must be received by Friday, May 28. Please contact Diane Rothman at dprothman@comcast.net or 860-388-3153 with any questions.

Parents Name: _____
Permanent Address: _____
Permanent Phone: _____
Summer Address (if different): _____
Summer Phone (if different): _____

Mother Work Phone: _____ Father Work Phone: _____
Mother Cell Phone: _____ Father Cell Phone: _____
Mother Email: _____ Father Email: _____

Emergency Contact Name & Phone: _____

Child # 1 Name: _____ Age: _____ # yrs in sailing lessons: _____
Does child #1 have any medical conditions we need to know about (Y/N): _____
If yes, please describe: _____

Cost: _____

Child # 2 Name: _____ Age: _____ # yrs in sailing lessons: _____
Does child #2 have any medical conditions we need to know about (Y/N): _____
If yes, please describe: _____

Cost: _____

Child # 3 Name: _____ Age: _____ # yrs in sailing lessons: _____
Does child #3 have any medical conditions we need to know about (Y/N): _____
If yes, please describe: _____

Cost: _____

Child # 4 Name: _____ Age: _____ # yrs in sailing lessons: _____
Does child #4 have any medical conditions we need to know about (Y/N): _____
If yes, please describe: _____

Cost: _____

Total Cost Lessons: _____

Do you have a boat that will be used for lessons?
Optimist: _____ Blue Jay: _____ 420: _____

Enclose check payable to 'NBYC' and mail to:
Diane Rothman, 22 Seacrest Rd, Old Saybrook, CT 06475

Niantic Bay Yacht Club
2010 Health Release and Waiver of Liability/Hold Harmless Agreement

Upon entering the programs offered by the NBYC, I/we hereby agree to abide by all applicable State, Federal and NBYC rules, as well as the directions and instructions from those supervising the programs and/or participating therein as volunteers. I/we further agree to indemnify and hold harmless NBYC, its officers, directors, and all members participating in these programs. It is understood that I/we enter the Program(s) entirely at my/our own risk and assume all responsibility for any injury or damage that may occur to, or to be caused by me/us or our wards. If the participant is a minor, it is understood that parents, permitting the child to participate in the program(s), do so at their own risk and assume all responsibility for any injury or damage that may occur to the child, or in turn caused by the child. I/we also agree to reimburse NBYC for all damages, including costs, which I/we may cause or contribute to. In the event of sudden illness or injury to my/our child while participating in any NBYC Program, I/we request the following: (a) if the illness or injury does not appear to be serious I/we authorize first aid to be administered on site, (b) if the illness/injury requires more than first aid, please call paramedics first then call me/us and Summer guardian, (c) if any of us cannot be reached immediately then NBYC is authorized to have the child transported to the nearest hospital emergency room and notify me/us thereafter. I/we accept full responsibility for all medical costs and agree to indemnify the NBYC for any expenditures which it may make on my/our child's behalf.

I acknowledge that I have read and will comply with the 2010 Health Release and Waiver of Liability.

Parent Signature _____ Date _____