

**2011 Seaford Yacht Club Junior Sailing Program  
Registration Form**

**I am registering my child for Session \_\_\_ held the week of \_\_\_\_\_ -**

**Participant's Name** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_  
\_\_\_\_\_

**Birth Date** \_\_\_\_\_ **Age** \_\_\_\_\_ **Height** \_\_\_\_\_ **Weight** \_\_\_\_\_

**Briefly describe the Participant's sailing experience (i.e. novice, completed SYC Beginning Sailing Program last year, sails on family boat, etc.)**

\_\_\_\_\_  
\_\_\_\_\_

**Parent(s)/Guardian(s)** \_\_\_\_\_

**Home Phone Number** \_\_\_\_\_ **Work Phone Number(s)** \_\_\_\_\_

**Mobil Phone Number(s)** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Names and Contact Phone numbers for any other adults who are authorized to pick up your child from camp or whom we may contact in the event of an emergency and we are unable to reach you.**

**Name** \_\_\_\_\_ **Number** \_\_\_\_\_

**Name** \_\_\_\_\_ **Number** \_\_\_\_\_

**Please list any allergies and/or other medical conditions that SYC instructors should be aware of or will prevent your child from participating in sailing activities.**

\_\_\_\_\_  
\_\_\_\_\_

The cost of the Junior Sailing Program is \$175 for Seaford Yacht Club members and family and \$200 for non-members. To reserve your space, a deposit of \$100 must accompany this registration form. The balance may be paid at any time, but must be paid in full at least 30 days prior to the sailing camp start date.

Mail to: Seaford Yacht Club  
Attn: Junior Sailing Program  
P.O. Box 1885  
Yorktown, VA 23692