

	SBSC Sailing School Registration Form - 2010 (Please complete the following and return by mail as directed below)	
Name:	Last	First
Address:	Street	
	City	Postal Code
Phone:	Daytime	Evening
	Email	
Emergency Contact:	Name	Phone
Swimming Level:	<input type="checkbox"/> Can't Swim <input type="checkbox"/> Beginner <input type="checkbox"/> Average <input type="checkbox"/> Advanced	

Please indicate the session you would prefer to attend: Note: all classes require a minimum attendance for the class to take place.	Session 1A: <input type="checkbox"/> Saturday mornings, May 29 - July 10.
	Session 1B: <input type="checkbox"/> Saturday afternoons, May 29 - July 10.
	No classes held on Canada Day long weekend
	Session 2A: <input type="checkbox"/> Saturday mornings, July 17 - August 21.
	Session 2B: <input type="checkbox"/> Saturday afternoons, July 17 - August 21
	No classes held on Civic Holiday long weekend

Where did you hear of the SBSC Sailing School?	
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1. Please forward this form and include a cheque made out to **Scarborough Bluffs Sailing School** for the amount of \$368.00. This fee includes GST and the cost of one manual which will be provided at the start of class.

2. Mail to:

**Scarborough Bluffs Sailing Club
Attention: Sailing School Director
2975 Kingston Rd.
PO Box 88061
Scarborough, ON, M1M 1P1**

3. All information provided on this application is considered confidential. It will not be published, sold or distributed and is solely for the purpose of the sailing club.

4. Sailing lessons are conducted both in class and on the water.

5. Classes held on Saturday from 8am until noon or 1pm until 5pm.

6. Classes are held rain or shine. If necessary, make up sessions will be arranged if too many water training days are lost due to inclement weather.

7. Once your registration and cheque have been processed you will be mailed a receipt and student package containing a student identification card and information on how to access the club.
8. The applicant will not be registered unless the application and waiver are fully completed including payment in full.
9. The applicant is responsible for any charges or penalties incurred by the SBSC as a result of processing an NSF cheque.
10. SBSC reserves the right and at the club's discretion to cancel classes due to insufficient participation (minimum of 5 participants per session) with a full refund.
11. Minimum class participant age is 18. If accompanied by a parent minimum participant age is 14.
12. Please note, to obtain the White Sail III certification you will be required to recover from and return an overturned boat to an upright position.

WAIVER/HOLD HARMLESS AGREEMENT

I, the applicant named above, understand and acknowledge that in consideration for accepting the applicant as a student in the Sailing School, the Scarborough Bluffs Sailing Club and the SBSC Sailing School will have the right to terminate the student's sailing course without refund should the student fail to comply with the safety rules and rules of conduct which, from time to time, will be set by the Sailing School staff and Director.

Further, I understand that it is a condition of participation in the SBSC Sailing School that I do so at my own risk. Therefore, in consideration of acceptance of my application and my being permitted to take part in the program, I agree to hold harmless and keep indemnified the Scarborough Bluffs Sailing Club, the SBSC Sailing School and their respective agents, officials, servants and representatives from and against all claims, actions, expenses and demands in respect to death, injury, loss or damage to my person or property, howsoever caused, arising out of or in connection with my taking part in the SBSC Sailing School programs, notwithstanding that the same may have been contributed to or caused or occasioned by the negligence of the same bodies or any of them, or their agents, officials, servants or representatives. I further understand and agree that this RELEASE is binding upon myself, my heirs, executors and assigns.

Name: _____

Signature: _____

Date: _____

