Chebeague Island Community Sailing School 2012

Student:

I, _____, will obey the Sailing School Rules, always wear my P.F.D. and close-toed shoes while on the dock and in boats, be considerate of the other students and cooperative with the Sailing School Staff.

_____ ___/___/___

Student Signature Date

Parent/guardian:

I, _____, absolve the Chebeague Island Community Sailing School of any liability for risk or injury incurred by the above student during the sailing program. I further state that my child is in sound health and is able to participate fully in this program. In addition, I authorize the program organizers or their employees to sanction emergency medical treatment if I cannot be contacted at the time of the emergency.

Emergency Contact Information:

Name Phone Number Relationship

_____

Health Insurance Carrier _____

Policy Number _____

_____ ___/___/___

Parent/Guardian Signature Date

Questions, Concerns?

Please contact Bob Earnest by email: bob324@chebeague.net

Please return this form, the registration form, and payment for your child's instruction to CICSS, C/O Bob Earnest, 12 Rose Point Road, Chebeague Island, ME 04017.

All students and a responsible elder should meet at the Chebeague Island Boat Yard at the appropriate time (see registration form for times) the first day of their session. Please bring swimwear and a complete change of dry clothes. A swim test will be conducted on the first day of class. All students will need to come to class each day with a lifejacket, close-toed shoes (ok for water) and their US Sailing lesson book.