

# 2015 Program Registration Form



Name of Participant \_\_\_\_\_

Age: \_\_\_\_\_ Gender: ☐ Male ☐ Female Email: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Birthdate: \_\_\_\_\_

	Week	Date	Time	Course	Program Cost
	1	July 6-July 10	9am-4pm	CANSail 1 & 2	\$310
	2	July 13-July 17	9am-4pm	CANSail 1 & 2	\$310
	3	July 20 -July 24	9am-4pm	CANSail 1 & 2	\$310
	4	July 27-July 31	9am-4pm	CANSail 3 & 4	\$310
	5	August 4 -August 7 <b>4 Day Week</b>	9am-4pm	CANSail 3 & 4	\$250
	6	August 10-August 14	9am-4pm	CANSail 1, 2, 3, 4	\$310
	7	August 17-August 21	9am-4pm	CANSail 1, 2, 3, 4	\$310
	8	Aug. 24-Aug. 28	9am-4pm	CANSail 1, 2, 3, 4	\$310
	Youth Race Program	July 8-Sept. 2	5:30pm-8:30pm	Youth Racing Program- Wednesday Night Race Coaching	\$375
	Tuesday Evening Adult Course	July 7- August 18	Tuesdays 6pm-9pm	CANSail 1 & 2 +	\$250 \$225 0 for students
<b>Course Cost</b> <b>+ Annual Mandatory Insurance Fee (to be paid ONCE per season)</b> <b>TOTAL</b>					<b>\$</b> <b>\$15.00</b> <b>\$</b>

SAFETY INFORMATION	Name	Telephone	Relation
EMERGENCY CONTACT 1:			
EMERGENCY CONTACT 2:			

How will your child arrive and depart from the sailing school? \_\_\_\_\_

Indicate current swimming/sailing abilities: \_\_\_\_\_ Family Doctor: \_\_\_\_\_

- ☐ Non-swimmer  
☐ Weak swimmer  
☐ Strong swimmer  
☐ Some sailing experience  
☐ CANSail 1  
☐ CANSail 2  
☐ CANSail 3  
☐ CANSail 4

Health Card #: \_\_\_\_\_

List any medical or learning conditions we should be aware of below:

(Including food or insect allergies)

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

If NOT paying online ([www.sailthunderbay.com](http://www.sailthunderbay.com)) please send payment, registration form & signed waiver to our mailing address.

**Sail Thunder Bay, 106 Logan Avenue, Thunder Bay, ON P7A 6R1**

Make cheques payable to **Sail Thunder Bay**. Call ahead to confirm availability 620-3664

**Note: Program spots will not be held until full payment is received.**