

2011 Program Registration Form



Name of Participant _____

Age: _____ Gender: Male Female Email: _____

Address: _____ Telephone: _____

Please check Program(s) and send form, along with payment and signed waiver to the address below.

	Week	Date	Time	Course	Program Cost
	1	July 4-July 8	9am-4pm	White Sail I, II, III	\$225
	2	July 11-July 15	9am-4pm	White Sail I, II, III	\$225
	3	July 18-July 22	9am-4pm	White Sail I, II, III	\$225
	4	July 25-July 29	9am-4pm	White Sail I, II, III Bronze Sail IV & V	\$225
	5	Aug. 1-Aug. 5	9am-4pm	White Sail I, II, III Bronze Sail IV & V	\$225
	6	Aug. 8-Aug. 12	9am-4pm	White Sail I, II, III	\$225
	7	Aug. 15-Aug. 19	9am-4pm	White Sail I, II, III	\$225
	8	Aug. 22-Aug.26	9am-4pm	White Sail I, II, III	\$225
	9	Aug. 29-Sept. 2	9am-4pm	Race Week (for students of any age interested in racing, White Sail III recommended)	\$225
	ADULT COURSE	July 5- Aug. 16	Tuesdays 6-9pm	White Sail I, II, III+ Price Includes \$50 membership to Temple Reef Sailing Club & Boat Access on Thursday Evenings	\$200

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 and sailing abilities: Family Doctor: _____

- Non-swimmer
- Weak swimmer
- Average swimmer
- Strong swimmer
- Some sailing experience
- White Sail I
- White Sail II
- White Sail III
- Bronze IV or V

Health Card #: _____

List any medical or learning conditions we should be aware of below:
(Including food or insect allergies)

MAILING ADDRESS:
Sail Thunder Bay
c/o Accounting Services
105 Villa Street
Thunder Bay, ON
P7A 7W5
www.sailthunderbay.com

Please contact Sail Thunder Bay at 620-3664 prior to payment and registration to ensure program availability.

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

Please send payment, registration form & signed waiver to our mailing address.

Make cheques payable to **Sail Thunder Bay.**