

## IDA LEWIS YACHT CLUB JUNIOR SAILING PROGRAM 2009 REGISTRATION FORM

### REGISTRATION CHECKLIST & PAYMENT OPTIONS

*For each student registering, please submit:*

- Completed Registration Forms
- Liability Waiver
- Medical Form
- Payment

Mail ALL above to: Ida Lewis Yacht Club, Junior Committee, P.O. Box 479, Newport, RI 02840

**APPLICATIONS WILL BE "RECEIVED" AND PROCESSED ONCE ALL PAPERWORK IS COMPLETE**

**REGISTRATION DEADLINE IS APRIL 1ST**

Jr. Sailor Name:		Birth Date:	__/__/__	Is student an Ida Lewis Member?	__Y__N
Jr.'s Cell #:		Grade Entering 9/09:		If No, Sponsor's Name:	
Jr.'s Email:				Sponsor's Email:	
Mother's Name:		Father's Name:			
Mother's Cell #:		Father's Cell #:			
Mother's Work #:		Father's Work #:			
Mother's Email:		Father's Email:			
Address:				Home Phone :	
City:		State:		Zip:	
T-shirt Size Adult __S __M __L Youth __M __L					
Parent would like to help with <input type="checkbox"/> Opti Regatta <input type="checkbox"/> Junior Fundraiser <input type="checkbox"/> Awards Banquet					

Level of Ida Lewis participation in 2008 (please check one) __Opti Beginner __Opti Intermediate __Opti Race __420 __Hunter __Commodore __Big Boat __None
Other Sailing Experience:
What are your goals and expectations of your child's experience at ILYC?

### PROGRAM CHOICE: Please check the appropriate class, session, and boat (privately owned or club boat)

If you have questions regarding your child's class placement, please contact Robbie\_B@verizon.net. Class sizes are limited and will be filled on a first come, first served basis.

OPTIMIST BEGINNER		8 WEEKS		4 WEEKS* __Session 1 or __Session 2
OPTIMIST INTERMEDIATE		8 WEEKS		4 WEEKS* __Session 1 or __Session 2
OPTIMIST RACE		8 WEEKS		Must have own boat.
ADVANCED OPTIMIST RACE		Special Schedule		
420/LASER ADVANCED		8 WEEKS		4 WEEKS* __Session 1 or __Session 2
Hunter 140 Please indicate Sailing Experience above!		8 WEEKS		4 WEEKS* __Session 1 or __Session 2
Commodore in Training		6 WEEKS 1 night Please choose night: __TUESDAY or __THURSDAY		
Big Boat Racing Team		6 WEEKS, Tuesday eves.		

Will your child:  Use a privately owned boat  
 Use a club boat

## IDA LEWIS YACHT CLUB JUNIOR SAILING PROGRAM 2009 REGISTRATION FORM continued...

Junior Sailor Name: _____	<i>Summer 2009</i>
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STEP 1: PICK PROGRAM AND 4 OR 8 WEEK SESSION, FILL IN FEE. IF 4 WEEK SESSION, PICK Session 1 or 2 STEP 1 FEES BASED ON USE OWN BOAT. SEE STEP 2 FOR BOAT ADDER FEE.							
	OPTIMIST BEGINNER		8 WEEKS	<b>\$800</b>		4 WEEKS	<b>\$450</b>
	OPTIMIST INTERMEDIATE		8 WEEKS	<b>\$800</b>		4 WEEKS	<b>\$450</b>
	OPTIMIST RACE		8 WEEKS	<b>\$825</b>	<b>NA</b>		
	ADVANCED OPTIMIST RACE		Special Schedule	<b>\$900</b>	<b>NA</b>		
	420/LASER ADVANCED		8 WEEKS	<b>\$825</b>		4 WEEKS	<b>\$450</b>
	Hunter 140... includes use of club boats! **		8 WEEKS	<b>\$950</b>		4 WEEKS	<b>\$525</b>
	Commodore in Training		6 WEEKS				<b>\$90</b>
	Big Boat Racing Team		6 WEEKS, 1 night TUESDAY				<b>\$185</b>
STEP 2A: Adder for use of club boat. Add \$0 if using your own boat.							
<b>OPTIS: \$75</b> adder for 4 week session, <b>\$150</b> adder for 8 week session <b>420s/Laser: \$85</b> adder for 4 week session, <b>\$175</b> adder for 8 week session No adder for Commodores in Training OR Big Boat Racing Team or Hunters.							+
STEP 2B: FOR Hunters only, if you bring your own boat, you get a credit.							
<b>Hunters: \$75 CREDIT</b> for 4 week session, <b>\$150 CREDIT</b> for 8 week session							-
STEP 3: Non member registration and "Special" Junior Membership Fee if junior sailor's parents are not members of ILYC							
<b>\$125</b> adder for 4 week session, <b>\$250</b> adder for 8 week session <b>\$40</b> adder for Commodores in Training and Big Boat Racing Team							+
<b>SUBTOTAL:</b>							
Non Refundable DEPOSIT <b>\$200 for members, \$300 for non members</b>							-
(DEDUCT DEPOSIT) <b>SUBTOTAL:</b>							
Late registration fee – for registrations received after March 1, 2009, add <b>\$50</b>							+
<b>BALANCE:</b>							

<b>Members, Non refundable deposit (\$200)</b> <input type="checkbox"/> Check for deposit enclosed <input type="checkbox"/> Charge to my credit card <input type="checkbox"/> Charge to my ILYC account	<b>Non Member, Non refundable deposit (\$300)</b> <input type="checkbox"/> Check for deposit enclosed <input type="checkbox"/> Charge deposit to my credit card ** <input type="checkbox"/> Balance to my credit card April 1 <sup>st</sup> **
VISA/MC # _____ EXPIRATION _____ AMOUNT _____ <div style="text-align: center;">Signature _____</div>	
Non-refundable deposits will be refunded only if the program cannot accommodate your child.	
Members, balance will be billed April 1 <sup>st</sup> on your ILYC account unless you request to have your credit card charged below: <div style="text-align: center;">_____ Charge balance to my credit card April 1<sup>st</sup></div>	
** Non members, balance will be added to your credit card on April 1 <sup>st</sup> , unless we received check before April 1 <sup>st</sup> .	

# Parent's Consent & Waiver of Liability – Assumption of Risk Indemnity Agreement

Junior Sailor Name:		<i>Summer 2009</i>
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I the undersigned parents or legal guardians (hereafter referred to in the singular) of \_\_\_\_\_ (the "child"), request and consent that the child be permitted to participate in events sponsored, endorsed, or assisted by Ida Lewis Yacht Club, including the use of boats that may be owned or maintained by said Ida Lewis Yacht Club (the "activities"). In consideration of such permission being granted, I agree as follows:

1. **WAIVER OF LIABILITY:** I for myself, my child, my heirs, personal representative and assigns forever release, remise, discharge and agree to save and hold harmless and indemnify Ida Lewis Yacht Club, its members, directors, officers, agents, employees, volunteers and owners and lessees of premises, upon which activities are held, the participants therein and the owners and lessees of all race equipment used therein (herein referred to as "the Releases") of and from any and all liability, claims, actions, and possible causes of actions whatsoever, including negligence of any of the foregoing that may accrue to me, my child, my heirs, and personal representatives and assigns from every and any loss, damage and injury (including death) that may be sustained to me, my child and property while in, about, and enroute into and out of premises and property upon which the activities are held.

(Please initial to indicate that you have read this paragraph\_\_\_\_\_).

2. **ASSUMPTIONS OF RISK:** I am aware that the activities involve potentially hazardous conditions, which may include, among other things, maneuvering a boat on deep waters, strong winds and high waves, sudden unexpected immersion in deep waters and collision with other watercraft or stationary objects such as docks, pilings, piers and buoys. With knowledge of the dangers involved, I voluntarily ask and consent that my child be allowed to take part in the activities. I **ACCEPT ANY AND ALL RISKS TO MYSELF AND MY CHILD OF INJURY, DEATH AND PROPERTY DAMAGE ARISING FROM PARTICIPATION IN THE ACTIVITIES AND THE USE OF FACILITIES AND PROPERTY OF IDA LEWIS YACHT CLUB, SPECIFICALLY INCLUDING ANY INJURY OR DAMAGE CAUSED BY THE NEGLIGENCE OF ANY OF THE RELEASEES.**

(Please initial to indicate that you have read this paragraph\_\_\_\_\_).

3. **INDEMNITY AGREEMENT:** I agree to indemnify and hold releasees harmless from any loss, liability, damage or cost including reasonable attorney's fees they may sustain or incur due or relating to my child's participation in the activities and use of the property and facilities of Ida Lewis Yacht Club, specifically including any such loss, liability, damage or cost resulting from the negligence or other action, of the Releasees.

(Please initial to indicate that you have read this paragraph\_\_\_\_\_).

**NOTICE:** Rhode Island Law provides that certain persons who assist in organizing or conducting youth sport programs under the auspices of a non-profit corporation, such as the Ida Lewis Yacht Club, are immune from civil liability (RI General Laws 9-1-48).

**I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THE AGREEMENT INCLUDES WAIVER OF LIABILITY, AN ASSUMPTION OF RISK AND AN AGREEMENT BY ME TO INDEMNIFY THE RELEASEES, AND I SIGN IT OF MY OWN FREE WILL.**

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

**IDA LEWIS YACHT CLUB JUNIOR SAILING PROGRAM  
MEDICAL HISTORY & RELEASE**

*Summer 2009*

**\*\*Please send in one copy for each participating child in the family\*\***

Junior Sailor Name: \_\_\_\_\_

\_\_\_\_\_

CLASS

Mother \_\_\_\_\_ Father \_\_\_\_\_  
Phone: Home \_\_\_\_\_ Home \_\_\_\_\_  
Work \_\_\_\_\_ Work \_\_\_\_\_  
Cell \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_

Summer Address (if different) \_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_ Relation \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

**\_\_\_\_\_ My child is healthy and may participate in all activities related to the Junior Sailing Program.**

Parent/Guardian Signature \_\_\_\_\_

Child's Physician \_\_\_\_\_

Physician's Phone Number \_\_\_\_\_

Medications \_\_\_\_\_

Allergies \_\_\_\_\_

Other medical conditions or concerns: (recent surgery, asthma or other breathing problems, hemophilia or other bleeding problems, seizures, diabetes, etc.). \_\_\_\_\_

Is there anything we should know that can make this a fun and happy summer for your child?

Medical Insurance Information: Parent/Guardian's Insurance Coverage:

Policy Holder \_\_\_\_\_ Carrier \_\_\_\_\_

Policy # \_\_\_\_\_ Group # \_\_\_\_\_

As the parent/guardian of the above named student, I hereby acknowledge that the risk of injury, including serious debilitating injury, is involved in athletic participation. I recognize that Ida Lewis Yacht Club and the Junior Sailing Program and their representatives make efforts to reduce these risks, but further recognize that their efforts cannot and will not eliminate all such risks. I am aware of the risks involved, and give my consent for the above named student to participate in all activities associated with Ida Lewis Yacht Club and the Junior Sailing Program.

I am aware that Ida Lewis Yacht Club and the Junior Sailing Program does not carry medical insurance for students and that medical insurance coverage will be provided by parent/guardian. Evidence of such coverage is provided above. I further release and hold harmless Ida Lewis Yacht Club, the Junior Sailing Program, its Officers, Directors and employees, from any and all liability arising from the above-named student's participation in the Ida Lewis Yacht Club, the Junior Sailing Program and all related activities.

**PARENT/ GUARDIAN EMERGENCY TREATMENT AUTHORIZATION**

*I hereby grant permission to any appropriately qualified health care professional to give any and all medically appropriate emergency care to my son/daughter/ward, including but not limited to anesthesia and surgery.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_