



**2020 SUMMER SAILING CAMP
REGISTRATION**

Camper's name: _____ Age: _____

Parent's /Guardian's name: _____

Address: _____

Tel No.: _____ Cell No.: _____

Alternate daytime telephone number, if applicable: _____

E-Mail address: _____

JYC Member: no ____ yes ____ JYC Member number: _____

Emergency No.: _____

Emergency Contact and Relationship:

Does your Child suffer from allergies, illness, disability or other medical condition? If yes, please detail below:

Yes [] No []

Please indicate which date/s they wish to participate in and payment method:

[] June 1st - 12th Level I (Beginner Sailors)

[] June 15th-26th Level II (Adventure Sailing) *Basic knowledge of sailing needed*

[] July 20th-24th Level III (High School Sailing Week)

Payment:

[] Check [] Cash

[] Charge to Member Number: #_____ [] Bill one time or [] over 2 months

Sailing Camp Schedule:

12:30pm to 5:30pm - Snacks and drinks will be provided by JYC.

After 6:00 there will be a \$10 charge per child per day for care.

Camp will not be cancelled due to weather but our activities will obviously be effected.

PLEASE NOTE: Sessions are limited to **18** children. Members will be given priority.

Required items:

A towel, sunscreen, hat, shoes (closed toed), reusable water bottle, lifejacket.

Fees for program – fees are per child per level session:

Member families (1 or 2 children/grandchildren): \$400 per child ages 7 to 18

Member families (3 or more children) \$1,000 per family

Non-members: \$425 per child ages 7 to 18

Non-member family payments due no later than **May 16, 2020**

Are you also participating in JYC Swim Team? _____ **Yes** _____ **No**

Basic requirements for participation:

1. Must be at least 7 years old.
2. Must be able to swim. All participants will be tested.
 - a. If participant cannot swim to satisfaction of instructors, they will be asked not to participate in camp and a refund will be granted.
3. Must supply a PFD (Personal Floatation Device), U.S.C.G. approved
4. Must wear PFD at all times on the water.
5. No open toed shoes or flip-flops

THE UNDERSIGNED parent(s)/guardian(s) certify that they give consent for the above-named camper to participate in the JYC Summer Sailing Camp, and agree by all rules and policies established by the Jackson Yacht Club regarding participation in the JYC Summer Sailing Camp. FOR AND IN CONSIDERATION OF THE ACCEPTANCE OF CAMPER INTO SUMMER SAILING CAMP, THE CAMPER AND HIS/HER PARENT(S) AND/OR GUARDIAN(S) DO HEREBY WAIVE ALL CLAIMS THEY MAY HAVE OR ACQUIRE AGAINST THE JACKSON YACHT CLUB, ITS OFFICERS AND AGENTS, IN CONNECTION WITH SUMMER SAILING CAMP AND AGREE TO INDEMNIFY AND DEFEND THE JACKSON YACHT CLUB AGAINST ALL DAMAGES WHICH ARE INCURRED AS A RESULT OF CAMPER'S PARTICIPATION IN SUMMER SAILING CAMP.

Parent/Guardian

Date

Parent/Guardian

Date

Mail Or drop off this application to:

2020 SUMMER SAILING CAMP
JACKSON YACHT CLUB
700 YACHT CLUB ROAD
RIDGELAND, MS 39157

JYC Members arrange for payment with JYC Office
membership@jacksonyachtclub.com OR bookkeeper@jacksonyachtclub.com

Non-members please include full payment

Director- Nilah
Jackson Yacht Club
700 Jackson Yacht Club Rd
Ridgeland, MS 39157
JYC Membership or Bookkeeper
Office: 601-856-8844