



Peterborough Sailing Club
Adult Sailing Lessons Registration Form
2007

Please Print

Name _____

Address _____ Postal Code _____

Home Telephone _____ Business Phone _____

Ont. Health Card No. _____

Emergency Contact _____ Telephone No. _____

Doctor's Name _____ Phone _____

Swimming Ability: Swimmer Non-Swimmer Level Achieved: _____

Please specify any allergies or other medical conditions that the Head Instructor should be aware of:

Everyone must wear a Canadian Department of Transportation approved PFD or life jacket at all times when in a boat or on the docks.

Previous Sailing Experience: _____

Dates: July Session (Schedule A, July 3-July 12, 2007) - \$270 (non-member), \$170 (member)

Are you interested in car-pooling? Yes No **Will you supply your own boat?** Yes No

How did you hear about the PSC Adult Sailing Lessons?

I am aware of the possibility that accidents may occur. I waive all claims against Peterborough Sailing Club and agree to indemnify Peterborough Sailing Club for any claim brought on my behalf against Peterborough Sailing Club.

Signature _____ Date _____

I enclose my cheque in the amount of _____ payable to Peterborough Sailing Club.

Please mail to: Peterborough Sailing Club, P.O. Box 223, Peterborough, Ont. K9J 6Y8