

Application for Sailing Camp Mountain Lakes Sailing Association

The Mountain Lakes Sailing Association offers a weekday sailing program for Mountain Lakes resident's children under the of age 18. The sessions run from 2:00 to 3:30 and 3:30 to 5:00. Camp operates Monday through Thursday for six weeks during the summer. There is a \$100 fee. If the youngster can only attend for a short time, the charge is \$35 per week or part thereof. A discount of 25% applies to siblings. Attendance is at the discretion of the parents, i.e., a child may attend any number of days.

Parent's Signature

Child Age

Print Parent's Name

Child Age

Street

Child Age

Town

Date

Phone Number

e-mail Address

2:00 to 3:30_____

or 3:30 to 5:00_____

I have passed my swimming test.

I agree to:

Wear my life jacket.

Stay with the boat if it overturns.

Immediately go to the beach if I hear thunder.

Immediately go the nearest shore and take cover if I see lightning.

Not swim during a play race or game.

Behave in a sportsmanlike manner

Child's Signature

Consent and Waiver

The undersigned for himself or herself, and for his or her children listed below, whoever may be entered in the training and racing program conducted by the Mountain Lakes Sailing Association as a voluntary community sports activity, does hereby

CONSENT to assume the hazards of the sport of sailing or accompanying an instructor on land or on a sailboat for sailing lessons, or competing in sailing events conducted by the Mountain Lakes Sailing Association; and

WAIVE any claims for damages or injury resulting from sailing or instruction in sailing which he or she may have against the Mountain Lakes Sailing Association or any member thereof participating in the sailing program.

My child has a medical condition (asthma, allergy to bee stings, etc.) which the sailing staff should know about yes ___ no____. Please describe below.

Parent's Signature

Child Age

Description of Medical Condition:

Circle the days you anticipate attending

	Monday	Tuesday	Wednesday	Thursday
July	6 13 20 27	7 14 21 28	8 15 22 29	9 16 23 30
August	3 10	4 11	5 12	6 13

Mail to: J. H. Eveleth, 44 Glen Rd., Mountain Lakes, NJ 07046