



WHITSUNDAY SAILING CLUB

Learn to Sail Enrolment Form - TERM commencing ___ / ___ / 2017

Name _____ Date of birth _____

Male Female AS Sailor ID No.(SIN). _____ WSC member no. _____

Address _____

Telephone number(s) _____ Email _____

Parent/Guardian Name _____ Contact Number _____

Swimming ability: It is strongly recommended that participants are able to swim.

Can you swim Yes No If Yes - how far can you swim _____

Disabilities/medical condition

Do you have a disability, impairment or long term medical condition which may affect your participation:

Yes No If yes please indicate your disability. _____

If you have answered yes would you like to receive advice on support services, equipment facilities?

Yes No

Disclosure: Student information may be disclosed to a third party for the purpose of an external audit

Declaration: (please read carefully)

If under the age of 18 this form must be signed by parent/guardian

I agree to abide by the Whitsunday Sailing Club Rules and regulations and Club Policy and acknowledge that facilities made available for my use will be used only in accordance with the principles of proper use and relevant rules. I confirm the accuracy of the information provided.

I understand that:

Whitsunday Sailing Club advises that the sport of sailing and learning to sail has a number of risks and dangers, as it is performed on the water and is subject to the elements of the weather.

Parent/Guardian/Student: Signature _____ Date: _____

SCHEDULE OF FEES

Basic Sills 1 Basic skills 2 Intermediate /Better Sailing
Per Term Tick applicable fees
Learn to Sail Tuition Fees \$220.00

Plus
Junior Club Membership and Australian Sailing Registration \$60.00

C/Card Payment: Card# _____ Exp: ___/___

Signature: _____

Total cost including GST Receipt no. _____ \$ _____