

Application
Florida Yacht Club Junior Fleet Summer Sailing Program
Please print clearly and legibly

Name of Applicant _____
Last First Middle

Date of Birth _____ Height _____ Weight _____ Sex _____

Home Address _____
Street

City State Zip Code

Parent's Name _____

Home Phone # _____ Cell Phone # _____

Parent's E-mail #1 _____

Parent's E-mail #2 _____

Member Application (Parent or Grandparent) FYC Member # _____

Pay by Check in the amount of \$ _____ Check # _____

(make check payable to FYC).

Bill my FYC account # _____ in the amount of \$ _____

Non-FYC member application: _____

Payment by check in the amount of \$ _____ is enclosed. Check # _____
Name

(make check payable to FYC).

I (We) to under signed, parents or guardians of this applicant consent to his/hers participating in The Florida Yacht Club Junior Fleet and in consideration of the permission granted to the above named person to take advantage of the facilities offered in connection with the Junior Fleet Activities, do hereby jointly and severally, for ourselves, our heirs, spouses, family members, personal representatives and assigns, agree to indemnify and hold harmless The Florida Yacht Club, its officers, personnel, agents, employees, acting officially or unofficially, against any and all suits, actions, claims, costs or demands, whether arising from sole or concurrent negligence or otherwise including those resulting from death, personal injury, and property damage, to which The Florida Yacht Club, its officers, personnel, agents and employees maybe subject by reason of the said above named persons joining The Florida Yacht Club Junior Fleet and taking part in its activities of his/hers presence on board any boats, piers, clubhouse, or any other places in connection with said "Junior Fleet Activities." Parents are responsible for, and agree to pay for, boat damage beyond normal wear and tear. Parents are responsible for their children both before and after actual class times, including, without limitation, the period from 12 noon to 1:00 pm.

Signature of Participant _____ Date _____

Signature of Parent or Guardian _____ Date _____