

# SUMMER JR SAILING

## JUNIOR BASIC SAILING CLASS

**Ages 8-18 years**

**2-week sessions**

**Weekdays All summer long**

**Morning sessions 9:00am - Noon**

**Afternoon sessions 1:00pm - 4:00pm**

<b>June 7-18</b> AM - Beginners PM - Beginners	<b>June 21-July 2</b> AM - Intermediate PM - Beginners	<b>July 5-16</b> AM - Intermediate PM - Beginners	<b>July 19-30</b> AM - Beginners PM - Intermediate	<b>Aug 2-13</b> After school 3 - 6pm	<b>Aug 16-27</b> After school 3 - 6pm
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**1<sup>st</sup> Session Starts June 7**

**For only \$99<sup>00</sup> you'll learn to  
be the skipper of the boat!**

*Let's go sailing!*

Learn the challenging sport of sailing.  
Take control of a boat where you can be Captain!

**For more information,  
call the Marina at 254-7667**



## **Statement of Understanding**

**The basic sailing course you are about to begin is an exciting and demanding challenge. You do need to be aware of what is involved in the course and be willing to study and practice to achieve success.**

**Program Rules:**

**Class runs Monday through Friday.** Students will be expected no earlier than 15 minutes prior to the start of class. The staff will be responsible for students no later than 15 minutes after ending time of class.

**Attire:** Shoes must be worn at all times (no slippers).

Shirts must be worn at all times.

P.F.D.s must be worn while sailing and are provided by the Marina.

Jackets may be needed for rainy days.

Sunscreen is highly recommended.

**Swimming and Free Sailing:** No swimming will be allowed from docks or piers. Boats and equipment may be used only with an instructor's permission.

**Horseplay:** Disruptive or destructive activity will not be tolerated and may result in program suspension.

**Swim Test:** All junior sailors, regardless of age, will be required to take a simple swim test, which consists of swimming 50 feet in the waters of the area you will be sailing in, and treading water for 1 minute, in sailing clothes, including shoes. A life jacket test will also be given the first day of class.

*I understand that in entering this sailing course, I agree to obey all Marina and program rules as set forth by the Program Director and the instructors; that I will use utmost care in the use of the boats and equipment; that I will not engage in any horseplay or other destructive behavior. I understand that failure to attend regularly, arrive promptly, and abide by the rules may result in my suspension from the program.*

Student's Signature \_\_\_\_\_

.....  
I/we understand the contents of this statement and agree to see that my/our child adheres to the program rules. I/we agree to assume the obligation for the expenses of repair and/or replacement of program equipment that is attributable to my/our child's reckless or irresponsible behavior. I/we agree to make an appointment for parent-instructor conference if requested.

Name: \_\_\_\_\_

Parent or Guardian of: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Duty Phone: \_\_\_\_\_

Birth date of child: \_\_\_\_\_

1. My dependent youth, whose name is listed above, has permission to participate in Marina activities. Such activities may include, but may not be limited to, water skiing, kayaking, power boating and sailing, under the supervision of Marina personnel, Youth Activities counselors and/or parent chaperones.
2. In the event of surgical emergency, I give permission to the physicians selected by the Naval/Army Medical Center to secure and/or administer such treatment including injections, anesthesia, or surgery, to my child, as may be necessary in their professional opinion. I further agree to waive all claims against the Marine Corps Community Services, Marine Corps Base Hawaii, Kaneohe Bay and Navy/Army Medical Center, or any other medical center personnel that may arise from such injury when participating in Marina activities.
3. I am aware of the fact that dependent medical services provided by the Navy/Army Medical Center do not include dental care or the replacement of eye glasses.

Signature of Parent or Guardian \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_ Date: \_\_\_\_\_