



PBSC Fall Youth Sailing Program 2018



Name: _____ Age: _____ Date: _____

Please check the class you would like to participate in.

_____ **Recreational Sailing** (Ages 7-17, any weight)

Session #1: September 8th – November 10th

Saturdays 9:00 AM - 12:00 PM

\$350 Members/ \$450 Youth Sailing Guest (per 10 week session)

(Bring a friend for a class for \$50!)

_____ **Optimist Race Team** (Ages 7-14, up to ~125lbs)

September 9th – December 9th (No practice November 25th)

Wednesdays 3:30 PM - 6:30 PM, Sundays 9:00 AM – 4:00 PM

\$800 Members/ \$850 Youth Sailing Guest

*Includes coaching at supported regattas and Florida East Coast Series #3 – PBSC – October 28th race registration. Optional practices the Saturdays before regattas from 9am-12pm with the recreational program.

\$150 Maintenance Fee

_____ **420 Race Team** (Ages 13-17, ~125lbs or over 5'6", subject to Director approval)

September 8th – December 9th (No practice November 24th)

Mondays 3:30 PM - 6:30 PM, Saturdays 12:00 PM – 3:00 PM

\$625 Members/ \$675 Youth Sailing Guest

*Includes coaching at supported regattas and Treasure Coast Series PBSC October 28th race registration

\$150 Maintenance Fee

Parent Orientation Night: September 5th, 2018

- Optimist Race Team: 6:00pm-6:30pm
- 420 Race Team: 6:30pm-7:00pm
- Recreational Program: 7:00pm-7:30pm

**All programs are subject to change based on interest levels; we will accommodate all sailors to the best of our ability.

Race Team Information

Participation requirements are as follows: registration with the program, commitment to the practices, use of TeamSnap for RSVP to practice and regattas, parental support traveling to/from regattas, agreement to be responsible for the transportation of boats to/from regattas and responsible for any additional fees noted in the following sections.

Coaching for the following regattas is included during the season; however, registration and housing fees are the responsibility of each participant:

Optimist Race Schedule

<u>Date of Race</u>	<u>Registration Fee</u>
Sunday, September 16, 2018 – Florida East Coast Series Regatta #1 – Melbourne Yacht Club	\$20-\$30
Register at: http://www.spacecoastsailing.org/	
Sunday, October 14, 2018 – Florida East Coast Series Regatta #2 – TCYSF (Fort Pierce)	\$20-\$30
October 20-21, 2018 – River Romp/Junior Olympics – Edison Sailing Center (Fort Myers)	\$TBD
Sunday, October 28, 2018 – Florida East Coast Series Regatta #3 – PBSC (Palm Beach)	Included
Register at: http://www.regattanetwork.com/event/17143	
Sunday, November 11, 2018 – Florida East Coast Series Regatta #4– YSF (Vero Beach)	\$20-\$30
December 1-2, 2018 – 2018 USA Junior Olympic Sailing Festival – USSCMC (Jensen Beach)*	\$90
Sunday, December 9, 2018 – Florida East Coast Series Regatta #5 – USSCMC (Jensen Beach)*	\$20-\$30
Register at: http://www.regattanetwork.com/event/16940	

*US Sailing Membership is required for this regatta.

420 Race Schedule

<u>Date of Race</u>	<u>Registration Fee</u>
Sunday, September 16, 2018 – Florida East Coast Series Regatta #1 – Melbourne Yacht Club	\$20-\$30
Register at: http://www.spacecoastsailing.org/	
Sunday, October 14, 2018 – Florida East Coast Series Regatta #2 – TCYSF (Fort Pierce)	\$20-\$30
Sunday, October 28, 2018 – Florida East Coast Series Regatta #3 – PBSC (Palm Beach)	Included
Register at: http://www.regattanetwork.com/event/17143	
Sunday, November 11, 2018 – Florida East Coast Series Regatta #4– YSF (Vero Beach)	\$20-\$30
Sunday, December 9, 2018 – Florida East Coast Series Regatta #5 – USSCMC (Jensen Beach)*	\$20-\$30
Register at: http://www.regattanetwork.com/event/16940	

• Participation in regattas is **NOT** a requirement, but is the goal of the race programs. For those not participating in regattas, there will be no practice on scheduled regatta days.

PBSC Sailing Program Pick-Up Authorization Form

Sailor's Name(s): _____

In addition to myself, the following individuals I have designated below are authorized to pick up my sailor(s). I have included the names of all individuals I have arranged to pick up my sailor(s) which may include myself, family members, nannies, carpool drivers, etc.

Full Name

Phone Number

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

Parent/Guardian's Name: _____

Signature: _____ Date: _____

Image of Child Waiver

I _____ (parent/ legal guardian) hereby grant PBSC the right to photograph and/or videotape my child and further to use said child's name, face, likeness, voice and appearance in connection with exhibitions, publicity, advertising, promotional and commercial materials without reservation or limitation.

Signature: _____

Date: _____

Palm Beach Sailing Club

561.881.0809

4600 N. Flagler Drive

West Palm Beach, FL 33407 www.PBSail.org office@pbsail.org

Palm Beach Sailing Club Sailing Program / Regattas Medical Waiver / Release

Child's Name: _____

Address: _____

City/State/Zip: _____

Date of Birth: _____ Medical Conditions: _____

Allergies & Medications: _____

Physician's Name: _____ Physician's Phone #: _____

EMERGENCY CONTACTS:

#1 Name & Phone: _____

#2 Name & Phone: _____

I hereby authorize my child to participate in the Palm Beach Sailing Club 2018 Sailing Program or Regattas. In consideration of the Palm Beach Sailing Club, a not-for-profit Florida corporation, providing sailing instructions to my child, I hereby release, acquit, and discharge the Palm Beach Sailing Club, its successors and assigns, its employees, agents, members, volunteers officers and directors from all claims, demands, actions, causes of action (including negligence and/or strict liability), damages, injuries and cost of any nature or kind whether property, personal injury or bodily injury or any other type of injury or damage that may arise from my child's participation in the sailing program as well as the use of the facilities of the club and its equipment. This release is on my behalf as the parent or legal guardian of the above named child and any person claiming through my child. I understand the risks inherent in the sport of sailing and in water sports in general, and in any activity involving children. I also understand that my child will be required to have basic swimming skills and will wear a life jacket at all times in or around the water. I also agree the photos or videos of my child may be taken during these events and I give my permission for the use of these photos or videos on any Club websites or brochures.

I also attest that my participating child is free and unencumbered from any physical or mental impairment and is free of any contagious or infectious disease that might interfere with his or her health or safety during this program.

I give Authorization to the Palm Beach Sailing Club for treatment in the event of any accident or injury if I cannot be reached.

Any person signing this document as parent or on behalf of a parent agrees to indemnify and hold harmless PBSC, its officers, employees, race committees, race participants, guests, agents, or anyone else associated with summer camp/regattas from any and all claims or lawsuits in which the child may bring. This indemnification and hold harmless agreement includes, but is not limited to: all damages, settlements, costs, and all attorneys fees incurred in defense of such claims.

NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN

READ THIS FORM COMPLETELY AND CAREFULLY, YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE THAT YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM PALM BEACH SAILING CLUB OR ITS REPRESENTATIVES IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM AND PALM BEACH SAILING CLUB AND ITS REPRESENTATIVE HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

I have read and attest that I agree with the above and all the terms on the front side of this document.

Print Name of Parent or Guardian

Signature of Parent or Guardian

Date