

**HAMPTON YACHT CLUB
SUMMER JUNIOR PROGRAM APPLICATION**

Please return a completed application and waiver form for each child along with a check for the fees to:

CHAIRMAN, JUNIOR ADVISORY COMMITTEE
HAMPTON YACHT CLUB
4707 VICTORIA BLVD.
HAMPTON, VA 23669

MAKE CHECKS PAYABLE TO THE: HYC JUNIOR PROGRAM. (Club members may charge this fee)

Program enrollment is not limited to yacht club members, so if you know of a boy or girl who wants to learn to sail please call the Hampton Yacht Club for extra applications.

APPLICANT'S NAME (PRINT) _____ Sex: M F BIRTH DATE _____

PARENT/GUARDIAN (PRINT) _____ HYC MEMBER # (For the application to be charged) _____

MAILING ADDRESS (PRINT)

Name _____

Street _____

City, State _____ Zip Code _____

CONTACT PHONE NUMBERS:

HOME _____ WORK _____ CELL, PAGER _____

EMAIL ADDRESS: _____

PLEASE ENROLL MY CHILD IN THE FOLLOWING CLASS*:

Explorer:	Monday to Friday 8:30am to 11:30am (Children 6 to 8). Call for available weeks		
-----------	--	--	--

OPTI Level 1:	1 st 2 weeks _____	2 nd 2 weeks _____	Tuesday/Thursday 8:30 – 4:30
---------------	-------------------------------	-------------------------------	------------------------------

OPTI Level 1:	1 st 4 weeks _____	2 nd 4 weeks _____	8 weeks _____	Tuesday/Thursday 8:30 — 4:30
---------------	-------------------------------	-------------------------------	---------------	------------------------------

OPTI Level 2:	1 st 4 weeks _____	2 nd 4 weeks _____	8 weeks _____	Monday/Wednesday/Friday 8:30 — 4:30
---------------	-------------------------------	-------------------------------	---------------	-------------------------------------

Travel Team	8 weeks _____	Monday/Wednesday/Friday 8:30 — 4:30
-------------	---------------	-------------------------------------

420 Level 1:	1 st 2 weeks _____	2 nd 2 weeks _____	Tuesday/Thursday 8:30 — 4:30
--------------	-------------------------------	-------------------------------	------------------------------

420 Level 1:	1 st 4 weeks _____	2 nd 4 weeks _____	8 weeks _____	Tuesday/Thursday 8:30 — 4:30
--------------	-------------------------------	-------------------------------	---------------	------------------------------

420 Level 2:	1 st 4 weeks _____	2 nd 4 weeks _____	8 weeks _____	Monday/Wednesday/Friday 8:30 — 4:30
--------------	-------------------------------	-------------------------------	---------------	-------------------------------------

*Note: These levels are to be used only as guidelines. Children whose abilities exceed a level's criteria will be moved to a different level at the Head Instructor's discretion.

How did you hear about our Summer Sailing Program? _____

I fully understand the conditions under which this application is made, and give my permission for his/her participation in the junior activities of the Hampton Yacht Club. I certify that the applicant is able to jump overboard in deep water and swim at least 50 yards and tread water for five minutes. I hereby assume financial responsibility on behalf of the applicant.

Signature (PARENT/GUARDIAN) _____ DATE _____

RELEASE FORMS MUST ALSO BE SIGNED AND ACCOMPANY THIS APPLICATION TO ALLOW PARTICIPATION.

If your child would like a program tee shirt fill out the order form below. The cost of tee shirts is \$12.50. Shirts will be ready for pick up at the June Parent Meeting

____ small youth ____ medium youth ____ large youth ____ medium adult ____ large adult ____ Xlarge adult