

Port Stephens Sailing and Aquatic Club
Learn to Sail Program
Enrolment Form

StudentAge.....Genderweight.....(Kg)
 Address
 School.....
 Can swim 50mSailing experience: None/SomeOwn life jacket/PFD.....

- 14th, 15th, 16th December 2011. Preference: am 9-12 or pm 1-4 Cost: \$120.00**
- 19th, 20th, 21st December 2011. Preference: am 9-12 or pm 1-4 Cost: \$120.00**
- 23rd, 24th, 25th, January 2012. Preference: am 9-12 or pm 1-4 Cost: \$120.00**

Allergies, medical conditions or special requirements.....
 Parents (or Guardian) Name
 Address
 Phone.....Mobile.....Work.....
 Email.....
 Safety Declaration : I,.....of.....

.....being the parent or legal guardian of
 consent to him or her participating in Port Stephens Sailing and Aquatic Club Inc (PSSAC) (ABN 82342127507) of Seaview Crescent, Soldiers Point NSW, Learn to Sail Program 2011/2012 upon the terms and conditions set out hereunder and agree to abide by all PSSAC regulations and safety requirements and to abide by the reasonable directions of the coaches and assistants during the above course. I do hereby indemnify the members, organizers, officers, agents and volunteers of PSSAC and program coaches from all claims, costs, demands whatsoever or howsoever arising from our acceptance of this entry and the participation in the program whether it be for personal injury or damage to boat or equipment and whether during rescue operations or otherwise. It is acknowledged that participation shall be entirely at the participants own risk.

Signed.....date.....

Contact person in case of emergencyphone.....

Full Payment required with registration.

- 1 By Electronic transfer: Port Stephens Sailing and Aquatic Club
a/c : 2801 1686
BSB : 062 826
- 2 By cheque post to : Port Stephens Sailing and Aquatic Club Inc
PO Box 176 Nelson Bay NSW 2315

For further information www.pssac.com or pssac.juniors@gmail.com