

**PBYC - Junior Sailing Program
Participant Registration Form**

Dates: August 6 - 10 , 2012

Amount enclosed \$_____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Date of birth: _____

Boating experience: _____

Parent or Guardian: _____

Daytime phone number: _____

Other emergency number: _____

*** LIABILITY RELEASE ***

PBYC insures its Summer Sailing Program, however its officers, employees, and volunteers assume no responsibility for the injury of persons participating in the Program. The undersigned understands that sailing has inherent risks and dangers and agrees to hold the Pensacola Beach Yacht Club, its officers, employees, and volunteers harmless because of death, illnesses or injuries sustained by this applicant. It is understood that the Pensacola Beach Yacht Club can at any time suspend a participant from the program for any reason. We, the undersigned parent, guardian or sponsor, hereby certify that we have given our consent to his or her participation in the PBYC Summer Sailing Program in accordance with all requirements stated.

Signature of Parent or Guardian: _____ **Date:** _____