



Goolwa Regatta Yacht Club

INTRODUCTORY KEEL BOAT AND TRAILOR SAILOR

Start crewing and Start helming

Theory and Practical Course.

The course is a Yachting Australia registered course, it is designed to provide participants with the skills to start crewing and start helming a keel boat or trailer sailor.

12th, 14th, 22nd October and 4th, 10th* November 2017

15th, 17th, 25th February and 3rd, 9th* March 2018

*Race experience either on a safety boat or as crew in a twilight race.

Conducted over 4 sessions – From 09.00am to 3.30pm

Application to enrol in the course.

Name.

Address.....

.....

Telephone No. Landline..... Mobile.....

E-mail address

Do you have any sailing experience? Yes/No If yes, please give brief details.

.....

Can you swim? (Please circle) Yes - Well - Moderate - Just - No.

Are you confident in the water? Yes - No.

Please provide details of somebody that may be contacted should an emergency arise during a course session:

Name.....

Relationship.....

Address.

Telephone. Landline..... Mobile.....

For the course, please wear appropriate clothing - Suitable closed shoes or sailing boots and a lightweight wind/spray jacket could be worthwhile. A change of clothes is also highly recommended.

A number of life jackets will be available at the yacht club. If you have one that meets safety requirements – please bring it with you.

YOU MUST COMPLETE ALL DETAILS ON REVERSE OF THIS FORM

WAIVER & INDEMNITY.

All water sports involve a degree of risk. GRYC and the Instructors take care to minimise and avoid unnecessary risks when engaging in water based activities.

Completion of the following acknowledgement, declaration, waiver and indemnity is required before commencing the Course.

Medical

If you are undergoing any medical treatment, or recovering from treatment or a medical condition please provide details to the Principal Sailing Instructor.

Do you suffer from any allergy, or are you allergic to any medication? If your answer is 'yes' please provide details to the Principle Sailing Instructor.

I declare that to the best of my knowledge, I am not suffering from epilepsy, dizzy spells, asthma, diabetes, angina, or other heart condition which may affect my ability to engage in sailing activities.

I am able to swim as stated on page 1 of this Application.

I understand that participating in any sailing program, including sailing instruction, may involve strenuous activity.

I declare that I am physically fit to participate in every aspect of those activities and that I am aware of and accept the risks of participating in a Sailing Course or program.

I acknowledge and agree that I will indemnify Goolwa Regatta Yacht Club Inc and all Sailing Instructors and other persons assisting in Sailing Instruction from all claims for injury, loss or damages including loss or damage to any of my personal property as a result of any act or omission by the GRYC, its officers, members and volunteers and Sailing Instructors arising from me participating in the Learn to Sail Course.

Signed Date.....

Print Name.....

PARENT OR GUARDIAN OF APPLICANT UNDER 18 YEARS MUST COMPLETE THIS SECTION

I confirm in relation to the Applicant that all details on this Application are true and correct and I ACKNOWLEDGE AND AGREE that I will INDEMNIFY GRYC its officers members volunteers and Sailing Instructors in respect of any claim by the Applicant in the terms of the Indemnity set out above.

Signed..... Print Name.....

Signature of Parent or Guardian of Applicant

Note: Please check for a place on the course. Places on the course are limited to enable a high level of instructor/participant interaction to take place. Should the course be filled, you will be offered a place in the next Goolwa Regatta Yacht Club 'Keel Boat training Course' at a date yet to be determined.

Course costs.

Non-Member
GRYC Member.

Senior.

\$470.00
\$360.00

Return this completed form, together with your course payment to:

**Goolwa Regatta Yacht Club.
Barrage Road
PO Box 321 Goolwa SA 5214**

Ph. 08 8555 2617.

Fax. 08 8555 3747

Email. gryc@gryc.com.au

Name on Card _____

Card Number _ _ _ _ _

Expiry Date _ _ _ _

CVV (Three digits on the back) _ _ _