

Fairhope Junior Yacht Club

Application for Membership

Name _____

Address _____

City _____ State _____ ZIP _____

Home Phone# _____ Cell# _____ Other# _____

Email: (Parents) _____ Sailor's _____

Birthdate: _____ Age: _____

I am interested in the Summer Sailing Program? Yes ___ No ___

I am interested in racing? Yes ___ No ___

I am interested in year round participation in the Junior program? Yes ___ No ___

Parents Names _____

Mothers Occupation: _____ Fathers Occupation: _____

Work phone# _____ Work phone# _____

EMERGENCY CONTACT (other than parents)

_____ Phone #'s _____

Doctors Name _____ **Phone#** _____

Insurance Company _____ **Policy#** _____

Please list any medical consideration, needs, or concerns...allergies, etc....

Liability release:

I understand that sailing involves risk of personal injury and or property damage. As a condition of my child's participation in the Junior Program, I hereby release any claims which I have against the Fairhope Yacht Club, its members, officers, employees, and clinic personnel from any liability for personal injury and property damage which I or my child may suffer during or arising out of participation in the program.

Date: _____

Annual Dues: \$30 FYC Member
\$10 per additional Child
\$45 non Member
\$15 per additional child

(Applicants signature)

Amount enclosed: \$ _____

(Parents signature)

(Sponsor - if parent not FYC Member)

(Return completed application, with dues, by dropping off at the FYC office or mailing to:
FYC Juniors, P. O. Box 1327, Fairhope, AL 36533)