

Rye Yacht Club.

Wing Foiling Program:



Sailing School Coordinator: Bob Cooper Cont

Email

Contact phone: 0432270167 info@ryeyachtclub.org.au



STUDENT ENROLMENT FORM:

To be completed by each student (and guardian if the student is under 18) applying for a place in a **Learn to Wing, Learn to Wing Foil or FoilLab Course** offered by **Rye Yacht Club**.

Privacy Statement:

Full Name:

Rye Yacht Club acknowledges and respects the privacy of individuals. The information that is being collected on this document is for the purposes of processing your enrolment in our Sail Training Program. It assists us in running an effective and safe program that best meets the needs of each individual participant.

Date of Birth:	/ /	Male / Female (please circle	or delete)
Height (approx):		Weight (approx):		
Address:				
Home Phone:		Mobile:		
Email address:				
Can you swim at le	east 50m safely?	Strongly/Comfortab	ly/ With a str	ruggle/No
Do you have a wet	: suit?		Yes / No	
Have you any prev	ious Sailing experien	ce?	Yes / No	
If yes, please detai	il:			
				_
Do you have any n	nedical condition tha	t we should be award	e of?	Yes / No
	nedical condition than cluding relevant me		e of?	Yes / No
			e of?	Yes / No
			e of?	Yes / No
			e of?	Yes / No
			e of?	Yes / No
	ncluding relevant me		e of?	Yes / No
If yes, please list in	ncluding relevant me		e of?	Yes / No
If yes, please list in	ncluding relevant me	dication required:	e of?	Yes / No
If yes, please list in Emergency Contact Name:	ncluding relevant me	dication required:	e of?	Yes / No

Please also complete and sign the second page:

If you are returning the form via email you can sign the hard copy available on the first day of your course.

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INACI	laration.	
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Warning: Sailing carries an element of inherent risk. Weather conditions can change quickly and may cause unexpected situations to occur. Serious accidents can happen despite well planned activities and due care in supervision. The applicant acknowledges and understands that they accept the risks involved in the program activities and voluntarily agrees to take part in them. I have read the warning above and wish to apply for a place in the program fully understanding the

risks involved.			
Applicant signature:		Date:	/ /
Guardian: (If applicant is under I authorise and consent to understanding the inherent ris Application Form is true and according to the strue and according to the structure and a	the applicant's participation ks involved. I also declare the		
Guardian signature:		Date:	/ /
Course Payment: Please note that to enrol in a Lear and complete a Membership Ap Membership is \$83.)	plication Form and pay the ap	opropriate Me	embership Fee. (A Junior
Course enrolment for:	Fee Payable:	Amoun	t Paid:
FoilLab:	\$100		
Learn to Wing / Wing Foil:	\$160 each		
Payment is required 1 week before	course commencement.		
Payment Method: please specif	ry Credit Co	ard	EFT payment
EFT Payments can be made to o Bendigo Bank, Acc. Name: RYC SA Please make sure you clear Or pay via Credit/ Debit Cards (I	AIL TRAINING SCHOOL, Acc Numb ly identify your payment with your fa		-
Photograph usage consent: Photographs of activities in the	Learn to Sail Program will be	taken on oc	casions. Rye Yacht Club

Photographs of activities in the Learn to Sail Program will be taken on occasions. Rye Yacht Club may wish to use them in promoting or publicising the Program with your permission. If you consent to this please complete the following:

I consent to any photographs of the applicant being used in official promotion or publicity material produced on behalf of Rye Yacht Club.

Participant's Consent: Guardian's Consent:
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