

[#] THE CRUISING YACHT CLUB OF WA

2 Val St, Rockingham, WA, 6168 08 9527 5468 sailing@tcyc.com.au Member Number:



Registration Form 2023/24 SAIL TRAINING

1) In	PERSONAL DETAILS
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Full Name				
Full Address	SON TO BE COVERED BY THE PLAN			
Suburb	Post Code			
Date Of Birth				
	D D M M Y Y			
E-Mail				
Please list any medical conditions :				

EMERGENCY CONTACT DETAILS

Primary Contact Name:					
Relationship:	Mobile number:				
Email:					
Secondary Contact Name:					
Relationship:	Mobile number:				
Email:					





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TRAINING COURSE PLEASE SELECT	
Tackers 1 - Having Fun (age 7-11yrs) - \$340	Tackers 2 - Tricks & Techniques - \$340
Pacers - Start Sailing & Better Sailing (child) - \$340	Pacers - Start Sailing & Better Sailing (adult) -
Minnow C - Start Sailing 1 & 2 - \$280	Minnow B - Better Sailing - \$280
Minnow A - Start & Better Racing - \$280	Lasers - Start & Better Sailing (child) - \$300
Lasers - Start & Better Sailing (Adult) - \$320	Flying Ants - Start & Better Racing - \$280
29er - Better Racing - \$280	
HIRE & STORAGE PLEASE SELECT	
Club Minnow/Flying Any Hire - \$250	Laser & 29er Storage (outside) - \$180
Minnow/Flying Ant Storage (shed) - \$180	
DECLARATION	

I acknowledge and agree to the following:

- I consent to me/my child (as relevant) participating in the Cruising Yacht Club of WA (TCYC) Sail Training Program.
- I recognise that sailing is a potentially dangerous activity. Inherent in the sport of sailing is the risk of permanent, catastrophic of death by drowning trauma, hypothermia or other causes. Whilst TCYC shall take reasonable care to avoid foreseeable risk of injury, I accept that I shall have no claim against TCYC or its officials, instructors or coaches in the event of any personal injury, however caused as a result of my/my child's participation in the program.
- I authorise medical attention to be administered to me/my child if required.
- I acknowledge that all participants in the program are required to be a member of TCYC.
- I agree to pay all Program fees prior to the commencement date of the program, along with any applicable hire/storage fees and membership fee (in accordance with TCYC policies).
- I acknowledge that a transition fee of \$30-\$60 will be payable in the event me/my child is assessed as meeting the requirements for additional courses and I wish for them to be accredited for such additional coursed by Australian Sailing.
- I acknowledge that TCYC will not be liable in the event of any missed sessions of the Program for whatever reason, including poor weather.
- I give consent for photographs and video's to be made of me/my child during their participation in the program and for the use of such photographs and video's by TCYC for promotional, marketing or training purposes.
- I consent to personal information being retained in relation to me/my child for the purpose of administration of the program.
- I acknowledge that all students must 'sign-on' at the administration desk at the beginning of each session and 'sign-off' at the finish. Students are expected to be ready to sail prior to the morning briefing session at 8.30am.
- I acknowledge that a parent/guardian must be present during the entirety of each training session unless alternative arrangements have been made with TCYC.
- I declare that any privately owned boat(s) used by me/my child during the program are covered with valid third-party liability insurance with the minimum cover of \$10 million per incident. I acknowledge that TCYC shall not be liable for any damage sustained to any privately owned boat in the course of the program.

Signature: