



Santa Cruz Yacht Club Junior Sailing Program

244 Fourth Av
Santa Cruz, CA 95062
telephone: 831-425-0690
fax: 831-425-7032

SCHOLASTIC PROGRAM REGISTRATION

This registration form must be completed and returned with program fee payment to the SCYC office, 244 Fourth Av, Santa Cruz, CA 95062, (831)425-0690. Annual Scholastic Program fee is \$60. Registrant must meet Interscholastic Sailing Association (ISSA) requirements for participation. Registrant must also be a SCYC Junior member in good standing, and their \$55 annual dues payment and application forms must be up-to-date.

To be filled out by registrant:

| | |
|---|--------------------------|
| Name: _____ | Home Phone: _____ |
| Address: _____ | Birth Date: _____ |
| City: _____ | State: _____ Zip: _____ |
| Email: _____ | Cell Phone: _____ |
| School: _____ | Grade Level: _____ |
| Parent Name: _____ | Phone: _____ |
| Parent Email: _____ | Parent Cell Phone: _____ |
| Parent Name: _____ | Phone: _____ |
| Parent Email: _____ | Parent Cell Phone: _____ |
| In registering for the Scholastic Program, I/We agree to save and hold harmless from any liability whatsoever the Santa Cruz Yacht Club, its officers, agents, and members from any liability of any nature whatsoever to the person or property of the above named applicant in connection with participation in the Santa Cruz Yacht Club Junior Sailing Program. | |
| _____ | _____ |
| <i>SCYC Scholastic Program registrant signature</i> | <i>Date</i> |
| _____ | _____ |
| <i>Parent/Guardian signature</i> | <i>Date</i> |

For SCYC use only:

| | |
|-----------------------------------|------------------------|
| Date registration received: _____ | Amount received: _____ |
| Membership number: _____ | |