



WET PANTS SAILING ASSOCIATION, INC
 PO Box 484, Sayville, NY 11782
www.wetpantssailing.org

2019 REMITTANCE FORM B - Sailing School Packet

For 2019 Membership & Sailing School. If not enrolling students, use short form "Remittance Form A - Membership Only".

INSTRUCTIONS

1. Only print and return pages applicable to you and your family. Dry-Sail storage form is separate, attach if requesting.
2. You can register classes online also in 2-steps, buy 1 Family Membership on www.wetpantssailing.org, then register!
3. If registering multiple students print an additional class registration page each, all other forms need only 1 "Family" copy.
4. Include TOTAL amount for sailing lessons for all students on the REMITTANCE FORM where indicated.
5. There is a \$50.00 per class, per student discount, if paid in full by June 1, 2019!
6. If you need help or have questions please come to an in-person registration at **30 Browns River Rd, Sayville, NY 11782: Saturday June 1st @ 9am-12pm* extended hour! Sailing School Registration Open House**

LAST NAME : _____ Tel. # (____) _____

Email 1: _____ Email 2: _____

ITEM <i>MEMBERSHIP: Select either FAMILY (just 1 per family) OR SENIOR (per individual age 65+)</i>	# QTY	COST EACH	TOTAL
WPSA Family Membership Fee (1 per family) \$185.00+\$15.00 tax = \$200.00		\$200.00	\$
WPSA Senior Membership (individual, age 65+) \$20.00 + \$1.75 tax = \$21.75/pp		\$21.75	\$
• Kyle Walker Scholarship Fund Contribution (optional)		\$5.00	\$
• Edwin Kinkaide Scholarship Fund Contribution (optional)		\$5.00	\$
• GSBYRA Scholarship Fund Contribution (optional)		\$2.00	\$
GSBYRA Membership Dues (optional)		\$7.00	\$
Summer 2019 Dry-Sail Storage Fees: (optional. Attach DRY SAIL form, enter total.)		\$	\$
Student #1 Sailing Lesson TOTAL - First Name: _____ Course Code: _____		\$	\$
Student #2 Sailing Lesson TOTAL - First Name: _____ Course Code: _____		\$	\$
Student #3 Sailing Lesson TOTAL - First Name: _____ Course Code: _____		\$	\$
Student #4 Sailing Lesson TOTAL - First Name: _____ Course Code: _____		\$	\$
SUBTOTAL		\$	\$
LESS: Volunteer Work Refund (attach voucher*) SUBTRACT!			-\$
GRAND TOTAL (Make check payable to: Wet Pants Sailing Association, Inc.)			\$

- (1) A volunteer work surcharge of \$25 is included in the family membership dues. A refund/credit is earned when two significant volunteer contributions are made to the club in the current year and you will receive a voucher* via email, in time to use for registration. Sign in at work events and coordinate with the Rear Commodore to receive credit for your efforts.
- (2) A Senior Membership of \$20/person (plus tax) may be elected for those 65 years and older but does not qualify the holder to take or sponsor sailing lessons nor carry Dry-Sail space privileges (individuals who have paid \$5 in previous years for a senior membership are grandfathered to the previous \$5 fee.)
- (3) Submit Sailing Class Application forms with payment. Availability is limited and taken on a first-paid basis. Registration IS NOT VALID WITHOUT PAYMENT IN FULL with all applications. Partial credit WILL NOT BE APPLIED for incorrect or insufficient payments. Entire application will be returned. There is a \$25 fee for returned checks.

QUESTIONS? Email vice-commodore@wetpantssailing.org



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2019 WPSA MEMBERSHIP APPLICATION FORM

physical location: 30 Browns River Rd - Sayville

TYPE: (Check 1) FAMILY MEMBERSHIP (\$185+tax) or SENIOR MEMBERSHIP (age 65+, \$20 + tax)
Senior Memberships are for individuals only and cannot elect to have lessons or dry sail storage privileges. If you are a prior Senior member at the \$5 rate, you do remain grandfathered in at the previous \$5 fee.

I, including spouse and our children (under the age of 21) all of whom reside at the same address (if applicable), am applying for annual family membership in the Wet Pants Sailing Association. We are a total of _____ family members.

Adult Name(s) _____

Street Address: _____

City: _____ State: NY Zip: _____ New Member? / Renewing?

Occupation(s): _____

Home Tel: _____ Cell: _____ Work: _____

Email(s): _____

List all Children's Names (w/ages): _____

Anyone in the family taking sailing lessons this summer? (#) _____ Adults _____ Child(ren)

FLEET INFO: Please provide information on any boats you have (can continue on back) Sailboat? Power Boat? Other?
 Class/Model of Boat Sail # _____

Boat Length? _____ Is your boat on a trailer? Y / N Dry-Sail wanted? Y / N (if Yes, complete and attach "Dry-Sail Form")

COMMITTEES: WPSA is an all-volunteer organization - we get things done by doing them together. Please check at least one committee you would like to serve on. No particular expertise is required; pitch in according to your ability. You will be contacted by email when volunteers are needed.

Regatta/Racing registration, committee boat, patrol, scoring, protest committee, lunch, maintenance boat repair, land side help, carpentry, electrical, painting, flooring, yard work, social planning, shopping, cooking/baking, set-up, clean-up, Junior Activities Movie night, junior racing events, car wash, sail overs, Junior Regatta

In return for membership dues and my commitment to participate in the meetings, educational, social, and work activities of the club, I/we: A. Are entitled to the rights and privileges extended to each member of the Wet Pants Sailing Association. B. Understand the cooperative nature of the club and the expectation to participate in its activities and contribute to its success. C. Understand that each family member, 14 years and older, has full membership status and has the right to vote on and participate in the discussion of all matters concerning the association. I / we agree: D. Not to hold Wet Pants Sailing Association responsible for damages or injuries to myself, or members of my family, resulting from club activities. E. To assume sole responsibility in determining whether or not to sail or race under any given conditions. F. To remove personal belongings from the building and grounds by the fall clean-up and authorize the Executive Committee to sell or discard ANYTHING left after that date (unless winter storage dues are paid). G. To pay all fees and charges when due.

I have read, understand & agree to the terms and conditions on this document.

Signed (adult) _____ Date _____

Print name: _____ Application Will Not Be Processed Without Signature

QUESTIONS? Email vice-commodore@wetpantssailing.org All correspondence will be via email



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SAILING SCHOOL REGISTRATION FORM * 1 FORM PER STUDENT! *

SAILING SCHOOL QUESTIONS? psc@wetpantssailing.org

Student's LAST NAME: _____ First Name: _____ Age: _____

Phone (adult): _____ Email (Adult - print): _____

SWIMMING ABILITY: Poor / Basic skills / Great How many prior years sailing instruction? _____ Where? _____

SAILING HISTORY?

ADULT SAILING: Ages: 16+ up. Learn parts of the boat and the sail, sensing wind direction, points of sail, capsize recovery, tacking, gybing, docking, reefing, anchoring, chart reading, tie square, stopper and bowline knots. Boats carry multiple students.
 FULL SUMMER @ July 1-Aug 15: #2AF Tuesday & Thursday (*corrected!) 6-8 pm \$510 _____

JR BEGINNERS SAILING: Ages: 8-14. No experience necessary. Learn parts of the boat, put sails on control, wind direction, move safely in the boat, steer with instructor guidance, tie knots (square, stopper and bowline). Stop and start, rescue man overboard, points of sail, capsize recovery, tacking, gybing, docking etc. Boats carry multiple students. Can repeat multiple years.
 FULL SUMMER @ July 1-Aug 1: #4BF M,T,W,&TH 8-10am \$975 _____ #2BFA M & W 8-10am \$510 _____ #2BFB T & TH 8-10am \$510 _____
 HALF SUMMER @ July 1 - July 25: #4BH M,T,W,&TH 8-10am \$510 _____

JR INTERMEDIATE SAILING: Ages 9-15. Review beginner skills, trim sails, reef, get out of irons, weight distribution, sail on just a main or jib, learn figure-8 & hotdog courses, rules, anchor, steer with tiller or sails, cleat & clove hitch knots, techniques for faster tacks, controlled s-shaped gybes, sail safe without instructor. Boats carry multiple students. Can repeat multiple years.
 FULL SUMMER July 1-Aug 15: #4IF M,T,W,&TH 10-12pm \$975 _____ #2IFA M & W 10-12pm \$510 _____ #2IFB T & TH 10-12pm \$510 _____
 HALF SUMMER @ July 1 - July 25: #4IH M,T,W,&TH 10-12pm \$550 _____

JR CRUISING: Ages 10-17. 3-day/wk advanced class, prior experience required. Review skills. Right a capsized boat, leave & return to dock, rescue man overboard, trim sails for power, heave to, sail backwards, anchor, use a navigational chart & compass, reef sail, sail on just a mainsail or a jib, call for help, knots - cleat hitch, clove hitch, reefing, bowline, sheet bend, rolling hitch, 3-strand rope eye splice for anchor and dock lines. Sail downwind, controlled s-shaped gybes, wing on wing, spinnaker. Multiple students sail Mercurys or student can sail own boat (ie: Sunfish, Laser, Opti) **15 student limit.** Repeat multiple years. **Check here if using own boat** _____
 FULL SUMMER @ July 1-Aug 15: #3CRF M, T & W 1:30pm-4:30pm \$875 _____
 HALF SUMMER @ July 1 - July 25: #3CRH M, T W 1:30-4:30pm \$510 _____

JR OPTI I: Ages 8-12. Intermediate - students should be able to sail before taking this class. Introduction to Opti sailing in a fun, safe controlled environment. Learn how to rig an Opti, tie Opti specific knots, tell wind direction, learn tack, capsize recovery and sail trim, techniques to complete tacks faster and controlled s-shaped gybes. Gain the confidence to sail an Opti (Optimist) solo. Students will be introduced to dinghy (Opti) racing. Can sail own boat.* Solo sailing. **Check here if using own boat** _____
 FULL SUMMER @ July 1-Aug 15: #401F M,T,W, TH 10-12pm \$975 _____ #202FA M & W 10-12pm \$510 _____ #202FB T & TH 10-12pm \$510 _____
 HALF SUMMER @ July 1 - July 25: #401H M,T,W,&TH 10-12pm \$550 _____ *Teens do outgrow an Opti and usually go to 420's & Flying Scots

JR OPTI II: Ages 9-13. Intermediate/Advanced, have taken Opti I, be comfortable sailing alone as the Opti (Optimist) is a small single sailor boat. This class is an introduction to dinghy racing Optis, build upon the skills learned in Opti I. Sailors learn to sail efficiently & independently to build self-confidence, learn advanced boat handling skills, review sail trim and steering with tiller and sails. Learn techniques to complete tacks faster, controlled s-shaped gybes. Can sail own boat.* Solo sailing. **Check here if using own boat** _____
 FULL SUMMER @ July 1-Aug 15: #402F M,T,W&TH 10-12pm \$975 _____ #202FA M&W 10-12pm \$510 _____ #202FB T&TH 10-12pm\$510 _____
 HALF SUMMER @ July 1 - July 25: #402H M,T,W,&TH 10-12pm \$550 _____ *Teens do outgrow an Opti and usually go to 420's & Flying Scots

JR RACING TEAM - ADVANCED: Ages 11-17. Advanced sailing skills needed, intro to team racing! Review, sail around port triangle, match racing, sailing PHRF. Learn how to use sail tails to adjust sail trim, use centerboard to adjust weather helm, adjust sail draft to increase Bernoulli effect, adjust opening between the jib & main to increase Venturi effect, identify if other boats on collision course and remedy, racing rules, strategies for starting, sailing upwind, passing boats on a reach, mark rounding. Knots include cleat & clove hitches, reefing knot, bowline, sheet bend, rolling hitch, 3-strand rope eye splice for anchor and dock lines. Wednesday night "Home" regattas encouraged, students are expected to attend all Friday Junior Regattas. We recommend (optional) students own a boat like a 420, Opti*, Laser, Sunfish. Parents required to take students/boats to Friday "Away" regattas. **Check here if using own boat** _____
 FULL SUMMER @ July 1-Aug 15: #5RACE M,T,W,& TH 1:30-4:30pm* \$1100 _____ *Friday Junior Regattas run about 9am-4pm offsite, TBA

*** NO CLASSES JULY 4th***

Total for this student \$ _____

All Regattas weather permitting, locations TBA!

DISCOUNT? Less \$50.00 (if Paid by June 1, 2019) \$ _____

ENTER THIS AMOUNT ON REMITTANCE FORM PAGE → TOTAL \$ _____



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SAILING SCHOOL - EMERGENCY CONTACT & MEDICAL INFORMATION FORM

(1 FORM PER FAMILY)

FAMILY LAST NAME: _____

I, the parent or guardian **attest to the "swimming ability" requirements below for** each child (P, B, G) Poor / Basic skills / Great

FIRST NAME STUDENT #1: _____ AGE: _____ DATE OF BIRTH: _____ Swim: P B G Gender: M F

FIRST NAME STUDENT #2: _____ AGE: _____ DATE OF BIRTH: _____ Swim: P B G Gender: M F

FIRST NAME STUDENT #3: _____ AGE: _____ DATE OF BIRTH: _____ Swim: P B G Gender: M F

FIRST NAME STUDENT #4: _____ AGE: _____ DATE OF BIRTH: _____ Swim: P B G Gender: M F

STREET ADDRESS: _____ TOWN: _____ ZIP: _____

MOTHER'S EMPLOYER: _____ Phone #: _____ Ext: _____

FATHER'S EMPLOYER: _____ Phone #: _____ Ext: _____

MOTHER'S CELL: _____ FATHER'S CELL: _____

IN CASE OF EMERGENCY, NOTIFY: _____

Relationship to child: _____ Phone Number: _____

HEALTH & MEDICAL

Physician: _____ Phone #: _____

Are there any physical/mental health information we should know? Submissions are confidential, on need-to-know basis:

Allergies: _____ How Severe: _____

Current Medications Taken Daily: _____

Emergency Medications/Devices – Does the child carry or wear? Please detail form, dosage and instructions:

Other Health Conditions or Emergency Medical Needs:

DISCLAIMER: Other than applying emergency first aid as needed, WPSA does not provide, disburse or administer any medications other than in emergency or life threatening situations for which you have indicated potential & protocol for, above.

Parent/Guardian Signature: _____ Date: _____

Print Name: _____



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SAILING SCHOOL - PARENTAL CONSENT AGREEMENT (1 FORM PER FAMILY)
RELEASE & WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY

This Release and Waiver of Liability (the "Release") is executed on this _____ day of the month of _____ 2019 for the following students:

By his/her/their parent or legal guardian (PRINT) _____ ("Guardian") in favor of WET PANTS SAILING ASSOCIATION, INC., a nonprofit corporation organized and existing under the laws of the Town of Islip, Suffolk County, New York, Wet Pants Sailing Association, and all of their respective directors, officers, members, employees, agents, students and assigns (collectively, "WPSA").

The Minor(s) desires to attend and participate as a student and volunteer for WPSA and engage in the activities related to being a volunteer on projects at WPSA. In consideration for participating as a student and volunteer, both Minor(s) and Guardian hereby freely and voluntarily, without duress, execute this Release under the following terms:

- 1. Guardian Status.** By my signature below, I attest that I am the parent or legal guardian of the Minor(s) named in this Waiver and Release, and that I have the authority to execute this Waiver and Release on behalf of the Minor(s).
- 2. Waiver and Release.** The Guardian and Minor(s) each release and forever discharge and hold harmless WPSA and their respective directors, officers, members, employees, agents, vendors, affiliates, successors other students and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from the Minor's time at WPSA. The Guardian and Minor(s) each understand and acknowledge that this Release discharges WPSA from any liability or claim that Guardian and Minor(s) may have against WPSA with respect of bodily injury, personal injury, illness, death, or property damage that may result from activities at WPSA on the water or on the premises. It is also understood that WPSA does not assume any responsibility for or obligation to provide financial assistance or other assistance to the Minor(s), including but not limited to medical, health or disability insurance in the event of injury, illness, death, property damage.
- 3. Insurance.** The guardian and minor each understand that we expressly waive any such claim for compensation or liability on the part of WPSA beyond what may be offered voluntarily and freely by the representative of WPSA, in its sole discretion in the event of injury or medical expense.
- 4. Medical Treatment.** The Guardian and Minor(s) each hereby release and forever discharge WPSA from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during the Minor's time at WPSA. I understand the WPSA and staff do not disburse, administer or provide medications except for emergency life or death situations.
- 5. Assumption of Risk and Indemnification.** The Guardian and Minor(s) each understand that the Minor's time with WPSA may include activities that may be hazardous to the Minor(s) including, but not limited to moving, loading, rigging, boarding and disembarking boats and trailers; sailing, transportation to and from away regattas. We recognize and understand that the Minor's activities at WPSA may, in some situations, involve activities which can pose risk of harm or injury to the Minor(s). As the Guardian for the said Minor(s) I, and the Minor(s) hereby expressly assume the risk of injury or harm in these activities and release WPSA from all liability for injury, illness, death or property damage resulting from the Minor's activities or time at WPSA. Guardian and Minor(s) agree that if anyone makes a claim against Wet Pants Sailing Association, Inc. or WPSA, on behalf of Guardian or Minor(s), that Guardian and Minor(s) agree to indemnify, save and hold harmless Wet Pants Sailing Association, Inc. and WPSA, from any claim, including without limitation, loss, liability, damage or cost which may occur as a result of any such claim.
- 6. Photographic Release.** As the guardian of said Minor(s) I, and the Minor(s) each grant and convey unto WPSA all right, title, and interest in all photographic images and video or audio recordings made by WPSA during the season. WPSA will honor requests to not make images public.
- 7. Behavior.** As guardian of said Minor(s) I, and the Minor(s) each understand that the Minor's behavior at WPSA must comply with all rules, laws and regulations of the Town of Islip, County of Suffolk, state of New York and United States of America or face removal, forfeiting monies paid.
- 8. Other.** The Guardian and the Minor(s) each expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the state of New York, and that this Release shall be governed by and interpreted in accordance with the laws of the state of New York. I agree that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall no otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

THIS IS A VOLUNTARY RELEASE OF ALL CLAIMS BY YOU. PLEASE READ CAREFULLY BEFORE SIGNING. I have read this Release, Waiver of Liability, Indemnity Agreement and Parental/Guardian Consent Agreement understanding I have given up rights by signing, I signed it freely and voluntarily.

PLEASE PRINT LEGIBLY!

Name of Legal Guardian _____ Signature of Legal Guardian: _____ Date: _____

Address of Legal Guardian _____

Name of Minor #1: _____ Signature of Minor #1: _____ Date _____

Name of Minor #2: _____ Signature of Minor #2: _____ Date _____

Name of Minor #3: _____ Signature of Minor #3: _____ Date _____

Name of Minor #4: _____ Signature of Minor #4: _____ Date _____