

REGISTRATION HYC OVERNIGHT CAMP 2010

Sailor's Name: _____

Sailor's Address _____

Parents Name _____

Home Phone _____ Cell _____

Sailing Experience (yrs, boat/fleet) _____

Sailor's Age _____ Date of Birth _____

Member HYC (YES) (NO) Membership Number _____

Registration for:

_____ Optimist Overnight Camp ("Junior Camp")

9 am Monday June 7 – noon Friday June 12
Sailors must be 9 or have finished 3rd grade.

Member fee \$500 Nonmember fee \$600

Need optimist to charter _____ (\$100 for the week)

_____ Laser / 420/29er Camp ("Senior Camp")

11 am Sunday June 14 to noon Thursday June 18
Sailors must be 13 or have finished 7th grade

Member fee \$500 Nonmember fee \$600

Need 420 to charter _____

Registration forms and payment for members is due by 4/18 to reserve space before opening up to non-members.

All Registration forms are due by May 16th

Sailor Name _____

Medical History

Any history of (please circle): Asthma Allergies Heart Disease
Please describe allergies and add any other medical problems _____

List any Medications: _____

List any Allergies to Medications: _____

Contact Information

Mother name _____

Home _____ Work _____ Cell _____

Father name _____

Home _____ Work _____ Cell _____

My child may be given (circle) Tylenol Motrin PeptoBismol Benadryl

Parent/Guardian Signature _____

Emergency Contact

Name _____ Phone _____

Payment:

Club Charge (must be paid by 4/30)

Check (must be paid by 6/1)

For Office:

Date Received _____

Need Opti Charter _____

Paid _____

Need 420 Charter _____