

Last Name \_\_\_\_\_ Registration # \_\_\_\_\_



community sailing center  
lake champlain : burlington vermont

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**Northern Vermont High School Sailing Team – Spring 2010**

Sailor's Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Parent or Guardian: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone Numbers: (H) \_\_\_\_\_ (C) \_\_\_\_\_

Student's e-mail: \_\_\_\_\_

Parent's e-mail: \_\_\_\_\_

School: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

*Please provide the name and phone number of a person we can contact in case of an emergency:*

Emergency Contact: \_\_\_\_\_

Phone (3:30 p.m. – 7 p.m.) \_\_\_\_\_ after 7 p.m./weekends \_\_\_\_\_

**IMPORTANT:** Please provide health information that we should be aware of (physical limitations, allergies, asthma, diabetes, medications, etc):

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**Eligibility:** The travel team is geared to provide performance sailing coaching and racing opportunities for sailors who already have some experience with racing. All Travel Team sailors must be able to swim 100 yards and tread water.

**Note:** Travel team members may be asked to provide their own transportation to regattas and events.

**Season Dates:** April 26-June 4,

**Practice Days:** Practice days will be determined at the beginning of the season. Practice will run from 4pm-6:30pm

**Cost:** \$225 per sailor for Spring 2010

**Payment Method:**    Cash        Check        Visa        Mastercard

Name: \_\_\_\_\_

Credit card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_