



AHSEP Enrollment Package – 2008 Sailing Season

LEARN TO *SAIL* !

In Atlantic Highlands

Novice Sailing Class (Youth Aged 8-15)

A two-week introduction to sailing for individuals with little or no sailing experience

Two Sessions are available. Choose one:

Session 1: Weekdays, July 21-August 1, 9am to Noon

Session 2: Weekdays, August 11-August 22, 9am to Noon

Intermediate Sailing Class (Youth Aged 8-17)

A two-week skills improvement program for individuals with sailing experience or who have graduated from the Novice Sailing Class --

Two Sessions are available. Choose one:

Session 1: Weekdays, July 7 – July 18, 9am to Noon

Session 2: Weekdays, August 11- August 22, 1pm to 4pm

Advanced Sailing Class (Youth Aged 13-17)

A two-week advanced sailing program for those who have successfully completed the intermediate sailing program—Two sessions are available based upon boat choice. Smaller and younger sailors should choose Optimist.

420: Weekdays, July 21 – August 1, 1pm to 4pm

Optimist: Weekdays, July 7 – July 18, 1pm to 4pm

Open Sailing (Available to all current AHSEP students)

These nights will be run as a race series with a variety of race courses. For sailors who just want to get on the water and sail for practice and fun, there will be a free-sail option in a designated area.

Tuesday evenings, July 8 - August 19 (excluding August 5). 5:30 pm to 8:00 pm

AHSEP Racing Program (Open to current ASHEP students)

Students will work with a race coach to develop and fine-tune competitive racing skills in the Optimist or 420. Race team will meet on Thursday nights with the coach and will have the opportunity to compete, accompanied by the coach, in selected regattas at local clubs throughout the season. (We must have at least 8 participants to run this program.)

Coaching nights: Thursdays, July 10 – August 21, 5:30- 8:00 pm

Feature Event: Junior Sweepstakes Regatta (open to any AHSEP student) The Junior Sweepstakes Regatta consists of 4 days of racing: The first 2 days will be sailed at SSYC on the Shrewsbury River (the South Shrewsbury Regatta), and the following 2 days will be sailed at Monmouth Boat Club on the Navesink River (the North Shrewsbury Regatta). Parental participation is necessary for boat transport.

Monday through Thursday – August 4 through August 7, all day

Sailing Adventure Week (Intermediate and Advanced Sailors)

This is a one week session concluding the summer. Instead of racing, the focus will be on enjoying sailing in other ways. Weather permitting, we plan to have activities such as sailing to a beach for a picnic, a pirate treasure hunt, and sailing games.

August 25-August 29, 9am to Noon

Courses are conducted by the Atlantic Highlands Sailing Education Program. We have certified US Sailing Instructors and use course materials supplied by US Sailing. Students learn to be skipper and crew, get classroom training and valuable on-the-water experience. We teach sailing safety, basic and advanced sailing skills, person overboard recovery, knots, and lots more.

If you have questions regarding these programs, please contact :

Mike Fortier 732-291-7230 OR Becky Sodon 401-368-5324



Space is limited, don't delay, enroll today!!

www.ahyc.net/ahsep

Further Enrollment Information

For all sessions, we ask parents to volunteer at least one class time, if possible, as a dock parent. No sailing knowledge is required. You are an extra set of eyes and hands for us and will be able to see what great things your child is learning.

AHSEP is offering a yacht burgee with the AHSEP logo at an additional cost of \$30. This high quality burgee makes a great addition to a junior sailor's room, or you can fly it from your own boat this summer.

Enrollments are granted in the order that forms and payments are received. Enrollment packages must be complete or they cannot be accepted. If classes are full, you will be automatically placed on the waiting list. You will then have the option of enrolling if dropouts occur.

Refunds for cancellations will be made provided that written notice of your cancellation is received prior to June 1st, 2008 (with a \$50 processing fee). This is to allow AHSEP time to contact wait-listed students.

A complete application must contain, **for each student**:

- Enrollment Form
- Medical Form
- Waiver
- Tuition Check for full amount made **payable to 'AHSEP' by May 15th, 2008** or due with the application.

Questions about the programs can be directed to:

Mike Fortier 732-291-7230 or Becky Sodon 401-368-5324

Each student should come dressed and prepared for a warm summer day, assuming they will get wet. Each student must bring, to every class:

- USCG approved Type II or Type III Lifejacket that fits
- Water or Gatorade/Sports drink (No soft drinks or juice) (** We no longer provide water. **)
- Boat, Water Shoes or Sneakers (not sandals, Teva's, or other open toed shoes.)
- Sun Tan Lotion, Towel
- Hat with visor
- Sunglasses (optional but highly recommended)
- Jacket for cool days (It sometimes can be cooler on the water than at your house.)

AHSEP Enrollment Form--Summer 2008

Please provide the following information; please use one form for each enrolling student:

Student's Name: _____ Age: _____
 Address: _____
 City: _____ State: _____ ZIP: _____
 Home Phone: _____
 Email Address: _____
 Emergency Contact #1 Name: _____
 Emergency Contact #1 Relationship to Student: _____
 Emergency Contact #1 Phone (specify type): _____
 Emergency Contact #1 Phone: (specify type): _____
 Emergency Contact #2 Name: _____
 Emergency Contact #2 Relationship to Student: _____
 Emergency Contact #2 Phone: (specify type): _____
 Emergency Contact #2 Phone: (specify type): _____

	Program	Dates	Tuition
<input type="checkbox"/>	Novice I	Weekdays, July 21-August 1, 9am to Noon	\$250
<input type="checkbox"/>	Novice II	Weekdays, August 11-August 22, 9am to Noon	\$250
<input type="checkbox"/>	Intermediate I	Weekdays, July 7 – July 18, 9am to Noon	\$250
<input type="checkbox"/>	Intermediate II	Weekdays, August 11- August 22, 1pm to 4pm	\$250
<input type="checkbox"/>	Junior Sweeps Regatta (Expected dates)	Monday through Thursday, August 4– August 7, full days	\$180
<input type="checkbox"/>	Advanced 420	Weekdays, July 21 – August 1, 1pm to 4pm	\$250
<input type="checkbox"/>	Advanced Optimist	Weekdays, July 7 – July 18, 1pm to 4pm	\$250
<input type="checkbox"/>	Open Sailing	Tuesdays, July 8 – August 19, (excluding August 5) 5:30pm to 8pm	\$150
<input type="checkbox"/>	Race Coaching Evenings	Thursdays, July 10 – August 21, (excluding August 7) 5:30- 8 pm See website for regatta information and pricing.	\$150
<input type="checkbox"/>	Adventure Week	Weekdays, August 25-August 29, 9am to Noon	\$180

***** PARENTAL VOLUNTEER COMMITMENT *****

(Please list the Program and day(s) you will be able to volunteer for as a dock parent for any class.)

Volunteer Name: _____ Contact #: _____

Program Name : _____ Program Dates: _____

I can Volunteer on: Week 1 ___ Mon ___ Tue ___ Wed ___ Thu ___ Fri

I can Volunteer on: Week 2 ___ Mon ___ Tue ___ Wed ___ Thu ___ Fri

T-Shirt Order: Please circle your T-shirt size

1. My Size Is	S	M	L	XL
2. Circle & Specify Adult or Youth	Adult or Youth	Adult or Youth	Adult or Youth	Adult or Youth

Optional AHSEP Burgee: Please order me a burgee at \$30 additional cost.

Tuition check payable to AHSEP for full amount due by **May 15th, 2008** or due with this application

A Medical Form & Waiver must be submitted for each student enrolling, at the time of application.

AHSEP, PO Box 43, Atlantic Highlands, NJ 07716

AHSEP

Medical & Emergency Information

This form must be completed and signed by you or your parents (if you are a minor) and submitted along with your course enrollment.

Name _____ Birth date _____ Sex _____

Address _____
No. Street City State Zip

Do you have a history of, or do you currently have any **physical limitations** that might prevent you from fully participating in this course? Yes ___ No ___ If yes, please specify on reverse.

Do you have any **disability** that might prevent you from fully participating in this course? Yes ___ No ___ If yes, please specify on reverse.

Please check (✓) those that apply and provide necessary information alongside.

Chronic Ailments

Asthma, or other respiratory problems _____

Circulatory or heart problems _____

Diabetes or hypoglycemia _____

Epilepsy _____

Hemophilia, or other bleeding problems _____

Other _____

Allergies

Insect bites _____

Bee stings _____

Foods _____

Drugs _____

Others, if significant _____

Current medications or pertinent information :

Blood type _____ Date of last tetanus shot _____

Family physician name _____ Phone _____

Date of most recent physical examination _____

Where are your medical records kept? _____

Insurance Carrier _____ Insurance ID _____

I, the undersigned, do hereby authorize and consent to any x-ray examination, anesthetic, medical or surgical diagnosis or procedure rendered under the general or specific supervision of any member of the medical staff or of a dentist licensed under the provisions of the Education Law and/or Public Health Law of the State of New Jersey and on the staff of any hospital holding a current operating certificate issued by the Department of Health of the State of New Jersey. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power to render care which the aforementioned physician in the exercise of his/her best judgement may deem advisable. It is understood that effort shall be made to contact the above people prior to rendering treatment to the patient, but that any of the above treatment will not be withheld if any of these people cannot be reached.

Signature of Applicant, OR Parent or Guardian (if applicant is a minor)

Date

ASHEP WAIVER

Summer 2008

IN CONSIDERATION of being given the opportunity to participate in any way in the Atlantic Highlands Sailing Education Program I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of Sailing Activities, both on the water and land based and that I am qualified, in good health, and in proper physical condition to participate in any Activity. I FURTHER WARRANT that I have basic swimming skills.

2. FULLY UNDERSTAND that: (a) SAILING ACTIVITIES INVOLVE RISKS AND DANGERS of serious bodily injury, including permanent disability, paralysis, and death ("risks"); (b) these risks may be caused by my own actions, or inactions, the actions of others participating in the Activity, the condition in which the Activity takes place, or the negligence of the "releasees" named below; (c) there may be other risks and social and economic losses either not known to me or not foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in any Activity.

3. AGREE AND WARRANT that I will examine and inspect each Activity in which I take part and that, if I observe any condition which I consider to be unacceptably hazardous or dangerous, I will notify the proper authority in charge of the Activity and will refuse to take part in the Activity until the condition has been corrected to my satisfaction.

4. HEREBY RELEASE, discharge, and covenant not to sue the Atlantic Highlands Sailing Education Program, their administrators, directors, agents, officers, volunteers and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place (each considered one of the releasees herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise, including negligent rescue operations; and I further agree that if, despite this release and waiver of liability, assumption of risk, and indemnity agreement, I, or anyone on my behalf, makes a claim against any of the releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS each of the releasees from any litigation expenses, attorney fees, loss liability, damage, or cost which may incur as a the result of such a claim.

I have read this 2-page agreement, fully understand its terms, and understand that I have given up substantial rights by signing it. I have signed it freely and without any induction or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force.

Printed name of Participant: _____
Street: _____
City: _____
State: _____ ZIP: _____
Phone: _____

Parental Consent

AND I, the minor's parent and/or legal guardian, understand the nature of sailing activities and the minor's experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby release, discharge, covenant not to sue, and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the releasees from all liability, claims, demands, losses, or damages on the minor's account caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the above releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS, each of the releasees from any litigation expenses, attorney fees, loss liability, damage, or cost that may incur as the result of any such claim.

(Printed name of Participant (18 yrs or older), or Parent/Guardian)

Name: _____
Street: _____
City: _____
State and ZIP: _____
Phone: _____

Participant (18 years or older), OR Parent/Guardian's Signature (if participant is under the age of 18):

Signature

Date