

Dories Junior Camp Registration Form

Parents Name			Date	
Child's / Children's Name			Age(s)	
Address			cell number	
City	State	Zip	home number	
Email Address		wo	rk number	
Emergency contact	Doctor			
Medical conditions / Allergies	?			
How did you hear about us? _ Can your child swim well?				
the boom when jibing, underwrelease, indemnify and hold have referred to as SSC) and all its	rater obstructions armless Van Bre employees, age illdren must be u	s, mechanical or ems Holland Ya ents and officers nder the control	s the sea, weather, other boats, moving object r structural failure, and other hazards. I agree achts, Inc. DBA as Sound Sailing Center (here in the event of any accident, damage or injur I of a responsible adult, who is solely respons.	e to eafter ry resulting
accordance with the rules of the	he American Arb	itration Associa agreed upon. Ju	ement, or breach thereof, shall be settled by a tion, said arbitration to be held in Fairfield Co udgment upon any award reached by the arbi hereof.	unty,
No refunds except as noted in and sign this of my own free v		uts. I am over 1	8 years old and have read and understand th	e above
Print Parents Name			Parents Signature	