



Saint Croix Sailing School

## SAINT CROIX SAILING SCHOOL REGISTRATION FORM

Student Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

School Attending \_\_\_\_\_ Grade Completed *as of 06/09* \_\_\_\_\_

Mother's Name \_\_\_\_\_ Phone: W \_\_\_\_\_ M \_\_\_\_\_

Father's Name \_\_\_\_\_ Phone: W \_\_\_\_\_ M \_\_\_\_\_

Whom do you prefer to be notified in case of emergency? *Please circle name and best daytime number.*  
*If you cannot be reached at the above phone numbers, please indicate a relative or friend that can authorize and consent to necessary emergency medical treatment.*

Name \_\_\_\_\_ Phone \_\_\_\_\_

Please complete this application for each student and mail with payment and waiver form to:

**SCSS Inc.**  
**PO Box 732**  
**Hudson, WI 54016**

### First Course:

Boat \_\_\_\_\_  Opti \_\_\_\_\_  420 \_\_\_\_\_  Laser \_\_\_\_\_  
Session (week beginning): \_\_\_\_\_  Intro  Intermediate  Advanced  Race \_\_\_\_\_  
Level \_\_\_\_\_ **Fee \$** \_\_\_\_\_

### Second Course:

Boat \_\_\_\_\_  Opti \_\_\_\_\_  420 \_\_\_\_\_  Laser \_\_\_\_\_  
Session (week beginning): \_\_\_\_\_  Intro  Intermediate  Advanced  Race \_\_\_\_\_  
Level \_\_\_\_\_ **Fee \$** \_\_\_\_\_

### Third Course:

Boat \_\_\_\_\_  Opti \_\_\_\_\_  420 \_\_\_\_\_  Laser \_\_\_\_\_  
Session (week beginning): \_\_\_\_\_  Intro  Intermediate  Advanced  Race \_\_\_\_\_  
Level \_\_\_\_\_ **Fee \$** \_\_\_\_\_

**Total Class Fees:** \$ \_\_\_\_\_

**Optional Contribution to Boat Equipment Fund** \$ \_\_\_\_\_

All boats and equipment owned by SCSS are purchased by donated funds. This helps keep costs for students as low as possible. Please consider supporting the school through a tax-deductible donation to the equipment fund.

**Optional Contribution to Scholarship Fund** \$ \_\_\_\_\_

The SCSS is committed to program access for any and students regardless of financial status. Please consider supporting our commitment to access for all with a tax-deductible donation to our scholarship fund.

**Total Enclosed:** \$ \_\_\_\_\_