

Dear Parents and Sailors,

Spring 2010

Falmouth Harbor Sailing School is preparing for the 2010 sailing season. Enclosed in this packet are descriptions of the classes, schedules and fees. Please send the registration forms with payment at the earliest possible date to ensure a place in the appropriate class.

Classes are filled on a first come first serve basis.

The 2010 season will begin on Monday, June 28th with an orientation session at 9:00am for all students who have never been enrolled in sailing at FHSS previously and have enrolled for the June session. An orientation will be offered as part of the first class at the beginning of second session on **July 26th**. Parents and/or guardians must attend the orientation if their student is a first time sailor. If a first time sailor enrolls in mid-session then an orientation session will be arranged with the director. At orientation the daily procedures of FHSS will be outlined. The new enhanced safety procedures will be demonstrated. A swim test will be administered. There will be an opportunity to meet the staff and have questions answered. For those sailors with their own boats, a seasonal inspection will be done with the staff. This is an excellent opportunity for families to get some help rigging their boats. The orientation should be fun and informative for parents and students.

The incentive for families to purchase their own boat for use in sailing classes is greater than ever. Not only is there a \$250 discount offered to boat owners for a full season (8 weeks) enrollment, the students can learn at a more efficient rate. Ownership of a boat guarantees inclusion in the program. It teaches children the proper care and respect for their equipment. Most important, it enables students to sail more and invest more interest in the process of becoming a better sailor. As a further incentive, if there are two children in the same family with a boat, and each child is enrolled in a different class, each child will receive the discount.

In addition to the application, the US Sailing medical consent form, the liability form and the rules of conduct are included in this packet. All forms must be completed and include a parental signature for each student. Please do not use one form for multiple children in the same family. Please note that applications will not be processed until FHSS has received payment in full. **No sailor will be allowed to participate in any FHSS activity, (including orientation), until payment and forms have been received.** Notification of successful enrollment in FHSS will be done via e-mail or phone. Classes will be filled on a first come, first serve basis.

A completed application must include the following documents:

1. Application with payment in full.
2. Signed Medical Form
3. Signed Waiver of responsibility
4. Signed Rules, (This should be signed by the student and parent).

Thank you for your interest in Falmouth Harbor Sailing School. Please call **(508) 548-7614** with any further questions. I look forward to seeing you on the water this summer.

Sincerely,

Falmouth Harbor Sailing School Board of Directors and Falmouth Yacht Club Sailing Education Committee

Mike O'Connor, Program Director

PROGRAMS: 2010

Classes are scheduled Monday – Thursday. The enclosed schedule and fee sheet outlines class times.

Friday is reserved for FREE sailing activities and racing. The racing program requires payment of the racing fee of \$20/week. Participation is not mandatory, but it is strongly encouraged. This is the best time to practice new skills that have been learned in class. It is a great time for the beginning sailor to have more time and experience in a boat. **A student doesn't have to race to participate in Friday Free Sail. All students are encouraged to attend.**

LEARN TO SAIL

This introduction to sailing class is for students 8 and 9 years old. Participants must be at least 8, or have completed second grade. Sailors will learn basic sailing skills: rigging and stowing of all necessary equipment, hoisting and dowsing sails, sail trim and steerage. They will learn to row, set an anchor and basic knot tying. The classes are taught in a Flying Scot with at least one instructor on board for every four students. This is a two week or four week class. At the end of the two weeks, each eligible student will be evaluated for placement in Opti 1. Instructors can help parents decide if another two week session is advisable. *Material may be repeated in successive sessions.*

OPTI

The Opti classes are separated into three levels of ability. A student needs to be at least 9 years old.

Opti 1 is the class for the beginner level Opti Sailors. Introduction to the International Optimist Dinghy Class and *basic boat handling* are the major components of this level.

Opti 2 is for the intermediate level sailor. A sailor must be able to handle an Opti in a proficient manner. Emphasis is placed on boat handling, and rules of sailing and boating.

Opti Racing is the class for a sailor aspiring to race competitively. Advanced boat handling techniques, racing tactics and strategies, and the Rules of Racing are some of the topics covered. These sailors should own their own boats and be prepared to travel to other clubs for inter club competitions.

420

The 420 classes are for the older student, (12 and up). These classes are also divided into three levels of ability.

420 1 is for the beginner, and it covers basic double handed boat handling and the rules of sailing and boating.

420 2 is for the intermediate sailor. The class covers more advanced boat handling techniques with emphasis on use of the trapeze and spinnaker.

420 Racing is designed for the sailor who wants to learn advanced team and fleet racing tactics and strategies.

CLASS SCHEDULE AND FEES 2010

FHSS operates two sessions of sailing. We encourage all students to enroll in both sessions, and offer discounts for enrollment in the 8 week program. (This offer does not include adult sailing).

1. Monday, June 28th – 9am First Session
Friday, July 23rd: Pizza Party and Awards
2. Monday, July 26th – Friday, August 20th
August 22nd- Sailing Awards Banquet, 7 pm

For the convenience of our sailors and their families FHSS now offers weekly enrollment for any combination of weeks during our two sessions.

All sailors, with the exception of adults, must pass a swim test administered by the life guard at Falmouth Yacht Club. Coast Guard approved Type 3 personal flotation devices must be worn at all times by all students and staff

| Name of Class | Days | Time | Cost/ Wk. | Cost /4Wks. |
|----------------------|---------------|--------------------|-------------------|--------------------|
| Learn To Sail | Mon. & Wed. | 9:00 am -11:00 am | \$75.00 | \$275.00 |
| Learn To Sail | Tues & Thurs. | 9:00 am -11:00 am | \$75.00 | \$275.00 |
| Name of Class | Days | Time | Cost/wk | Cost 8/wks |
| Opti 1 | Mon-Thurs. | 8:30 am - 11:00 am | \$115.00 | \$850.00 |
| Opti 2 | Mon-Thurs. | 10:30 am -1:00 pm | \$115.00 | \$850.00 |
| Opti Racing | Mon-Thurs. | 1:30 pm - 4:00 pm | \$115.00 | \$850.00 |
| Racing Fees | | | \$20 | \$80 |
| 420 1 | Mon-Thurs. | 8:30 am -11:00 am | \$115.00 | \$850.00 |
| 420 2 | Mon-Thurs. | 10:30 am - 1:00 pm | \$115.00 | \$850.00 |
| 420 Racing | Mon-Thurs. | 1:30 pm - 4:00 pm | \$115.00 | \$850.00 |
| Racing Fees | | | \$20 | \$80 |
| Free Sailing | Fridays | 10:00 am -1:00 pm | FREE | FREE |
| Racing | Fridays | 1:30 pm - 4:00 pm | Racing Fees Apply | Racing Fees Apply |

Fees do not reflect the facility fee for non Falmouth Yacht Club members. The fee is \$32/week or \$125 per 4 week session.

Learn to Sail and Adult Sailors facility fee is \$17/week or \$65 per 4 week session.

The racing fee is \$20/week for sailors to participate in racing activities supported by FHSS outside of the normal class times (i.e. regattas) and on Fridays.

A family discount of 15% is available for two or more children enrolled from the same family

| | | |
|-------------------------|--|---------------------|
| Private Lessons: | to be scheduled with program director | \$50.00/hour |
|-------------------------|--|---------------------|

| | | |
|-------------------------|--------------------|---------------------|
| Private Lessons: | 2 students: | \$75.00/hour |
|-------------------------|--------------------|---------------------|

APPLICATION FOR ENROLLMENT: FHSS

**Please, One Application per Student !
All fees MUST accompany this application.**

NAME: _____ Date of Birth ____/____/____

NICKNAME: _____ Age on June 28th 2010 _____

PARENTS' NAMES: _____

MAILING ADDRESS: _____

CITY/ STATE/ ZIP: _____

LOCAL PHONE: _____ E-MAIL _____

(Best Method)

BEST PHONE TO REACH YOU: _____

FYC MEMBER: () YES () NO MEMBER ACCOUNT NUMBER (if applicable): _____

(Non Falmouth Yacht Club members will be assessed a \$32/week (or \$125.00/4week session) facility fee for each student. Learn To Sail classes are assessed \$17/week (or \$65.00/4week session). FHSS is not able to extend reciprocity to members of other yacht clubs.)

Please refer to enclosed class and fee schedule to complete the following:

LEARN TO SAIL CLASS: _____

(specify the days and dates you prefer)

OPTI, 420 CLASS YOU WOULD LIKE TO SAIL IN: _____

(Be Specific)

I PLAN TO SAIL FOR: 8 WEEKS 1ST 4 WEEKS 2ND 4 WEEKS

Other (please give start date and end date) _____

PAYMENT: _____ FACILITY FEE: AMOUNT _____

(if applicable)

METHOD: CHECK _____

CREDIT CARD: (Visa or Master Card) _____

(Number)

AMOUNT TO CHARGE: _____ Expiration _____

Name as it appears on the card.

**Cancellation Policy: 100% refund if withdrawn 1 week prior to start;
50% refund if withdrawn up to 1 week after start of class.
No refund after first week of class.**

RULES OF SAFETY AND CONDUCT
FALMOUTH HARBOR SAILING SCHOOL, INC.

PLEASE carefully read and understand the Rules of Safety and Conduct listed on the following page. **After reading, please acknowledge your understanding by signing and returning this page with your completed application.**

Retain the list of rules for your use.

I, _____, have read and understand the Falmouth Harbor
Student's name

Sailing School Rules of Safety and Conduct. I agree and understand that failure to follow them may result in expulsion from the class, and in the event of repeated violations, expulsion from the program. I further understand that any and all program fees will NOT be refunded in the case of expulsion.

Signature of Student

Date

Signature of Parent

Date

RULES OF SAFETY AND CONDUCT

Class Preparation

1. A swimming test must be passed each Year.
2. Personal Flotation Devices (PFDs?) must be worn by all students and instructors at all times while on the docks, floats or boats.
3. Appropriate protective foot wear will be worn by students and instructors at all times while on docks, floats and boats.
4. Punctuality is expected.

General Conduct

Fair Play, Team Cooperation, Good Sportsmanship are expected behavior at Falmouth Harbor Sailing School

5. Instructors' directions regarding boats, skippers and crews, weather, etc. must be obeyed. Instructors' safety signals **MUST** be obeyed: voice, whistle or flag
6. Offensive behavior or language will not be tolerated.
7. The staff, grounds and members of the Falmouth Yacht Club will be respected.
 - a. The beach and the foyer are off limits to non-FYC members.
 - b. The Upper Deck Restaurant and Deck are off limits to all students.
 - c. All students who are not members of FYC must leave the premises immediately at the end of the class session.
8. All equipment, supplies and vessels will be used safely and conscientiously.
9. Respect for the rights and property of neighbors is expected.

Specific Conduct

10. Boats and equipment will be left in proper condition and stored appropriately at the end of each day.
11. Running in the dock area is not permitted.
12. Swimming in the Inner Harbor is not allowed.
13. FHSS is not responsible for items left on the property. All personal effects will be taken home daily. Items left longer than one week will be donated to a local charity.
14. Students must strive to develop competency in safety drills, capsized drills, towing and rescue procedures.

Please keep these rules for easy referral. Do not return with the application.

RESPONSIBILITY and LIABILITY RELEASE
FALMOUTH HARBOR SAILING SCHOOL, FALMOUTH, MA 02540

Assumption of Risk:

I am aware that the activities of the program may involve maneuvering a boat on deep waters in potentially hazardous conditions which may include, without limitation, strong winds and high waves, sudden and unexpected immersion in deep waters and collision with other watercraft and/or stationary objects such as surface and submerged rocks, pilings and buoys. With full knowledge of the dangers involved, I voluntarily request that my child participate in the program. I accept any and all risks to myself and my child in the activities and use of the facilities and property of Falmouth Harbor Sailing School and Falmouth Yacht Club, whether or not the losses result from negligence or other action, except for intentional acts of any of the employees or directors.

Waiver of Liability:

I waive and release any right I, my heirs, distributees, guardians, legal representatives and assigns may have or acquire to make claim against, sue, attach the property of, or prosecute Falmouth Harbor Sailing School and/or Falmouth Yacht Club or any of their directors for monetary damages caused by injury to my child or damage to the property of myself or my child arising from my child's participation in the activities and use of facilities and property of Falmouth Harbor Sailing School and Falmouth Yacht Club, whether or not injury or damage results from the negligence or other action, except intentional acts of the Falmouth Harbor Sailing School and/or Falmouth Yacht Club employees or any of their directors.

I have carefully read this agreement and understand its contents. I am aware that the agreement includes a waiver of liability and an assumption of risk. I sign this document of my own free will.

Name of Junior Sailor

Date

Name of Parent or Guardian (please print)

Signature of Parent or Guardian

Date

MEDICAL CONSENT FORM: FHSS

NAME OF PARTICIPANT (printed): _____

NAME OF PARENT OR GUARDIAN (printed): _____

In the event of accident or injury to myself, my spouse or any child of mine (specifically including my child named below as the "Participant") or in the event of illness of myself, my spouse or any child of mine while in, on or about the premises of Falmouth Yacht Club or while participating in any activity sponsored by or under the auspices of said Club and Falmouth Harbor Sailing School under circumstances where I'm physically unable to consent or am not present:

1. I hereby voluntarily consent to the furnishing to myself, my spouse or any of my said children of such medical care, attention and treatment by any hospital, physician or physicians as such hospital, physician or physicians may deem necessary or advisable.
2. I authorize any officer or adult member of the Falmouth Yacht Club or Falmouth Harbor Sailing School to consent to such medical care, attention or treatment.
3. I agree to pay reasonable cost of such medical care attention or treatment and to indemnify and hold free and harmless of and from any and all liability for such cost the Falmouth Yacht Club and the United States Sailing Association and its officers and members thereof.

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 State Education Law and/or Public Health Law of the State and on the staff of any hospital holding a current operating certificate issued by the State Department of Health. 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 judgment may deem advisable. It is understood that every effort shall be made to contact the undersigned prior to rendering treatment to the patient, but that any of the above treatment will not be withheld if the undersigned cannot be reached.

IN CASE OF EMERGENCY PLEASE CALL: _____

RELATIONSHIP **PHONE NUMBER**

SIGNATURE OF PARENT/GUARDIAN: _____ **DATE:** _____

PHYSICIAN WHO CONDUCTED YOUR MOST RECENT PHYSICAL EXAMINATION: _____

NAME **PHONE #** **DATE OF LAST EXAM**

HEALTH INSURANCE CARRIER **INSURANCE ID NUMBER**

MEDICAL AND EMERGENCY INFORMATION: FHSS

NAME: _____

ADDRESS: _____

Street/PO Box

City

State

Zip

TELEPHONE: _____ (R) _____ (B) **DATE OF BIRTH:** _____

PARTICIPANT AND PARENTS MUST RESPOND TO THE FOLLOWING QUESTIONS AS ACCURATELY AND COMPLETELY AS POSSIBLE:

PLEASE CHECK THOSE THAT APPLY: *(Provide necessary details below)*

CHRONIC AILMENTS:

ALLERGIES:

- | | |
|--|--|
| <input type="checkbox"/> <u>ASTHMA OR OTHER RESPIRATORY PROBLEMS</u> | <input type="checkbox"/> <u>MEDICATION</u> |
| <input type="checkbox"/> <u>DIABETES OR HYPOGLYCEMIA</u> | <input type="checkbox"/> <u>BEE STINGS/INSECT BITES</u> |
| <input type="checkbox"/> <u>HEMOPHILIA, OR OTHER BLEEDING PROBLEMS</u> | <input type="checkbox"/> <u>FOODS</u> |
| <input type="checkbox"/> <u>CIRCULATORY OR HEART PROBLEMS</u> | <input type="checkbox"/> <u>OTHERS, IF SIGNIFICANT <i>(describe below)</i></u> |
| <input type="checkbox"/> <u>EPILEPSY</u> | <input type="checkbox"/> _____ |

DATE OF LAST TETANUS SHOT: _____

BLOOD TYPE *(if known)*: _____

CURRENT MEDICATIONS *(if any)*: _____

DETAILS: _____
