



TACKERS Course Enrolment Form 2019

1. Enrolling for: (please tick relevant program)

- TACKERS 1 7-11 January (morning class) TACKERS 2 7-11 January (afternoon class)
- TACKERS 1 14-18 January (morning class) TACKERS 2 14-18 January (afternoon class)

2. Participant Information (please print clearly)

First Name: _____

Surname: _____

Date of Birth: ____ / ____ / _____

Swimming Ability: _____

Are you a Williamstown Sailing Club member: _____

T-shirt size: ____

2a. Participant Information (for second child from family)

First Name: _____

Surname: _____

Date of Birth: ____ / ____ / _____

Swimming Ability: _____

Are you a Williamstown Sailing Club member: _____

T-shirt size: ____

3. Parent / Guardian Contact Details (please print clearly)

Contact 1

Name: _____

Relationship: _____

Address: _____

Mobile _____ Home Phone _____

E-mail _____

Contact 2 (optional)

Name: _____

Relationship: _____

Mobile _____ Home Phone _____

E-mail _____

Is your family happy to receive information and promotions not directly related to the Learn to Sail Program from AS and TACKERS corporate partners or Williamstown Sailing Club? Yes / No

4. Medical

Does your child suffer from any illness or disability? Yes / No
(if yes, please provide details to WSC Tackers Administrator)

Does your child suffer from any allergy or is he / she allergic to any medication? Yes / No
(if yes, please provide details to WSC Tackers Administrator)

In case of emergency, please contact: _____

Mobile: _____

In an emergency, do you authorise the TACKERS Instructor to arrange any necessary medical treatment for your child where prior notification has not been possible? Yes / No

5. Signature

I acknowledge that:

- This waiver covers activities conducted by Williamstown Sailing Club, referred to here as The Club.
- My son/daughter is able to swim to the level of fallibility listed above.
- I hereby waive any claims that I may have against Williamstown Sailing Club or its Officers as a result of any action or omissions on their part in connection with any activity at any time at Williamstown Sailing Club.
- I understand that participating in any sailing program may involve strenuous activity and I declare that my child is physically fit to participate in every aspect of these activities and that I am aware of and accept the risks of my child participating in a sailing program.
- I also hereby confirm that the information provided by me herein is true and correct.

I consent to photographs of my children being placed on the Club Web site and/or Club publications.

Signed (parent or legal guardian)

Date

6. Payment details

WSC Members Course Fee - \$250 per child (\$20 discount for each additional sibling)

Non Members Course Fee - \$300 per child (\$20 discount for each additional sibling)

Total Authorised Payment Amount: _____

Payment Method: Card / Cheque / Cash / Electronic Transfer

Credit Card:

VISA MASTERCARD

Credit Card No. _____ Expiry Date ___ / ___

CCV No. _____

Name on Card _____

Signature of card holder _____

Electronic Transfer Details: BSB: 633108 A/C:149266439 Ref: 'your child's surname'

Cheques: payable to Williamstown Sailing Club

Cancellation: Cancellation within 1 week of course receives no refund, unless place is filled.

7. What to do with the form

Email the form back to: tackers@williamstownsailingclub.org.au

Or Hand In on Saturday mornings to Williamstown Sailing Club, The Strand Williamstown

Or Post to Williamstown Sailing Club PO Box 50 Williamstown VIC 3016

Any questions? Please email tackers@williamstownsailingclub.org.au