WEQUAQUET LAKE YACHT CLUB

Swimming Program Application

I hereby apply for acceptance in the Wequaquet Lake Yacht Club Sailing Program and agree that I will abide by the By-Laws and Rules of the Sailing Program and Wequaquet Lake Yacht Club.

Parent/Guardian:_____ Phone:_____
Address:_____
Email:_____(for notification of upcoming swimming info)

Child's Name	Date of Birth	Skill Level

Swimming Fees: $95.00 Regular Lessons

$40.00 Swim Team Member

Total Fee (per child) Included: $_____

Please Note

Swimming sign ups are June 19th from 9am to noon. All sailors are required to have three forms on file: this Application Form; the Medical/Emergency Form; and the Emergency Authorization Form. If you cannot attend sign ups on June 19th[t], please complete all forms and remit along with payment, by June 19th, to:

WLYC
PO Box 399
Centerville, MA 02632

If you have any questions, please contact Andrew Nugnes, Program Director, at director@wlyc.com or at 508-360-0576.

Official WLYC Use Only

Application Complete _____
Emergency Treatment Authorization _____
Medical/Emergency Form Completed _____
Fees Paid _____