

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)

<u>Child's Name</u>	<u>Date of Birth</u>	<u>Skill Level</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Swimming Fees: \$95.00 Regular Lessons
 \$40.00 Swim Team Member

Total Fee 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, please complete all forms and remit along with payment, by swimming signup day to:

WLYC
PO Box 399
Centerville, MA 02632

If you have any questions, contact Lynn Donahue, Swimming Director at swimming@wlyc.com

Official WLYC Use Only

Application Complete _____
Emergency Authorization to Treat _____
Medical/Emergency Form Completed _____
Fees Paid _____