



Privateer Sailing Education Foundation  
 4713 Privateer Road  
 P.O. Box 1041  
 Hixson TN 37343



**Privateer Sailing  
(PSEF) Camp**

**Education Foundation  
Registration Form 1 of 2**

Sail Camp is for students Ages 8 – 17. Sessions run Monday thru Friday 8:45 am to 4:00 pm at Privateer Yacht Club, 4713 Privateer Rd, Hixson, TN. Cost per week is \$300. Scholarships and discounts are available for: multiple weeks -\$25/wk., multiple children from the same family -\$25/student, or based on special financial needs. Sailors must: Have a comfortable Coast Guard approved life jacket, Have close toed sneakers or water shoes, Be mature, Be able to learn and follow directions, Be open to new exciting water sports, and Pass a swim test.

Please indicate the week or week (s) that you prefer.

- WEEK 1 – JUNE 7 TO 11
- WEEK 2 – JUNE 14 TO 18
- WEEK 3 – JUNE 21 TO 25
- WEEK 4 – JUNE 28 TO JULY 2
- WEEK 5 – JULY 5 TO JULY 9
- WEEK 6 – JULY 12 TO 16
- WEEK 7 – JULY 19 TO 23 overflow week, which will occur only if there is enough demand

How did you find us? Google Search \_\_\_\_\_ Publication \_\_\_\_\_ Online website \_\_\_\_\_  
 Street Banner \_\_\_\_\_ Friend \_\_\_\_\_ PYC Member \_\_\_\_\_ Other \_\_\_\_\_ (please be specific about website, publication, or other)

Parent/Guardian name: \_\_\_\_\_ Phone: HM/WK \_\_\_\_\_ Mobile \_\_\_\_\_

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

E-Mail Address: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Sailor's First (Nick Name): \_\_\_\_\_ Last Name: \_\_\_\_\_

Male  Female  Age as of camp week: \_\_\_\_\_, Weight: \_\_\_\_\_, Height Feet: \_\_\_\_\_, Inches \_\_\_\_\_

T Shirt Size: Youth Sm \_\_\_\_\_, Youth Med \_\_\_\_\_, Youth LG \_\_\_\_\_, Adult Small \_\_\_\_\_, Medium \_\_\_\_\_, Large \_\_\_\_\_

Previous Sailing Experience: None \_\_\_\_\_, 1 Yr \_\_\_\_\_, 2 Yr \_\_\_\_\_, 3 Yr or more \_\_\_\_\_,

Food Allergies, Physical Concerns, Other Information:

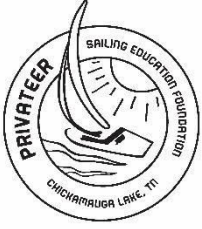
\_\_\_\_\_

Note: PSEF does not provide lunch. We do not serve any snacks containing nuts.

Physician's Name \_\_\_\_\_ Phone \_\_\_\_\_,  
 Health Insurance Co. \_\_\_\_\_ Policy Number \_\_\_\_\_ Group Number \_\_\_\_\_

**BY SIGNING THIS DOCUMENT, YOU HAVE: READ, UNDERSTOOD & AGREE WITH: Privateer Sailing Education Foundations Hold Harmless/Statements of understanding attached, which includes Parent/Guardian Agreement, Medical Release, Permission to Provide Necessary Treatment & Emergency Care, Photo Permission and Camper Agreement. Make checks out to "PSEF": Mail Enrollment form with check to: Director Tim Chambers, 476 Mason Dr., Ringgold GA 30736. Direct additional questions to: [tim@psef.us](mailto:tim@psef.us) , 423 718 3704.**

Signed by Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_



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Education Foundation

## **PSEF CAMP HOLD HARMLESS/ STATEMENTS OF UNDERSTANDING**

**Parent/Guardian Agreement:** I/We understand the contents of this statement and agree to see to it that our child adheres to the program rules. I/We understand there is potential for accidental injury to our child as a participant in Sail Camp, and our child is responsible for following directions to assure a safe experience. However, there is the possibility of unknown or uncontrollable dangers that could result in injury. I/We willingly assume risks associated with this program and hereby release, waive and discharge my right to sue Privateer Yacht Club, Privateer Sailing Education Foundation or any member, staff or volunteers. I/We agree to assume the obligation for the expenses of repair and/or replacement of club/program equipment that is attributable to my child's reckless or irresponsible behavior. I/we agree to make an appointment for a parent-instructor conference if requested.

**Emergency Care:** In the event of a medical emergency of my child attending Sailing Camp and if I cannot be reached, I authorize the Sail Camp Director to call 911 to either treat and/or transport my child to the hospital at their discretion.

**Photo Permission:** I give permission for use of my child/children in promotional photographs and/or videos including the camp web page and social media sites utilized by the camp. My child may be interviewed, photographed, and/or videotaped by the news media, including newspapers, magazines, television, and/or radio, for camp community interest stories and advertising.

**Camper Agreement:** The basic sailing course you are about to begin is an exciting and demanding challenge, but you need to be aware of what will be involved in the course and be willing to study and practice to achieve success. A swim test is required of all students, which consists of swimming 50 yards in sailing clothing and shoes. I understand that in entering this sailing course I agree to obey all program rules as set forth by the program director and the instructors, that I will use utmost care in the use of the boats and equipment and that I will not engage in any horseplay or other disruptive behavior. I understand that failure to attend regularly, arrive promptly, and abide by the rules may result in my suspension from the program. I understand that Sail Camp is an outdoor water sport program and I may be exposed to Hazards such as sunburn, overheating, bruises, cuts and other injuries. I am responsible for telling my instructor if I feel ill or have gotten hurt.