

MEDICAL INFORMATION

Child's Name: _____ Male _____ Female _____

Medical Insurance Company: _____

Policy Number: _____ Family Doctor: _____

Subscriber's Name: _____ Doctor's Phone Number: (____) _____ - _____

Subscriber's ID Number: _____

Please describe any medical needs or concerns:

Date of latest tetanus shot: ____/____/____

Allergies:

Current medications:

Physical Challenges:

Learning Disabilities:

Worries/Fears:

MEDICAL PERMISSION: The undersigned hereby authorizes an instructor from the Program or an adult who bears

this document to authorize emergency treatment for the Junior Sailor in the event that a parent or legal guardian cannot be

reached at the above telephone numbers at the time of the emergency.

Date Name of Parent or Legal Guardian *(Please Print)* Signature of Parent or Legal Guardian

PARENT/STUDENT AGREEMENT

By accepting this Parent/Student Agreement, we, as the named child herein ("Junior Sailor") and as the parent (guardian) of the Junior Sailor, hereby

acknowledge that the execution of this Agreement is a condition of the participation of the Junior Sailor in Sail Salem, Inc.'s Sailing Program

("Program").

WAIVER AND MEDICAL PERMISSION

By accepting this Agreement, I, as the parent (guardian), accept that the sport of sailing and the conduct of the Program entail and are subject to

certain inherent risks. On behalf of the Junior Sailor I do hereby:

1. Grant my consent to the Junior Sailor's participation in the Program and agree that this Agreement will extend to the Sail Salem, Inc. ("SSI"), its Officers, Directors, employees, agents and volunteers.

2. Consent to the participation of the Junior Sailor in sailing events which are a normal part of the Program (regattas and/or events) and agree that this

Agreement will extend to the benefit of any sailing clubs or association which is the host to or is the venue of such events.

3. Waive any claims against and release any obligation of SSI, its respective members, officers, directors, employees, volunteers and agents or any

other person acting in any capacity for the conduct of the Program (each an "Indemnified Person") in relation to any loss, injury, or damage (on land

or at sea or in transportation to the Program or any event) to the Junior Sailor or to the boat or other property of the undersigned or the Junior Sailor

to the fullest extent permitted by law.

4. Reimburse SSI and each Indemnified Person for any loss or damage to property, and to indemnify and hold SSI, and each Indemnified Person

harmless from any claim, loss or injury caused by the negligence, or misconduct of, or failure to exercise reasonable care by the Junior Sailor.

SUBSTANCE ABUSE

The Sail Salem, Inc. was organized in 2007 to provide the young people of Salem and its surrounding communities a comprehensive opportunity to

learn the sport of sailing, experience the joys of boating, acquire an enduring respect for the water and share in the fellowship of each other's

company. However, it is incumbent on sailors to be fully aware of what is around them and requires all of a person's faculties without any

impairment. SSI offers or will offer a variety of opportunities for the novice to the experienced sailor. Participants are expected to comport

themselves in ways which reflect pride in themselves, SSI, and the community. They are expected to set good examples at all times when sailing off

Winter Island or while away at a regatta. Participants are subject to SSI policies regarding use of alcohol and drugs. Since the goal of SSI is to

develop a respect for boats, water, others and ourselves, we expect participants to obey all local and state laws. Therefore, the use of alcohol or drugs is illegal. At any time while you are enrolled in SSI, you are expected to refrain from situations when your conduct may reflect detrimentally on the reputation of yourself and the SSI program in the community. Participants violating SSI policy regarding the illegal use of alcohol and drugs will incur the following penalties, in addition to legal penalties that may be incurred through proper authorities:

1. For a first violation, the participants will be suspended from all SSI activities and classes for a period of two weeks. No fees will be refunded for loss of time.

2. Any subsequent violation, the sailor will be removed from the program.

We, as the parent (guardian) and Junior Sailor have read and understand the policy regarding the illegal use of alcohol and drugs. I am aware of the consequences for violating the rules and promise to adhere to these rules.

Name of Parent or Legal Guardian (*Please Print*) Signature of Parent or Legal Guardian

Date Date of Birth

Please bring this form to your first day of class and submit it in person.