



**Stonington Harbor Yacht Club
2018 Private Instruction Form**

*If you have multiple children participating in private lessons,
please be sure to fill out a separate form for each.*

Student Name First: _____

Student Name Last: _____

Dates of Interest: _____

Goals Hoping to Accomplish: _____

Do you have a personal boat for the requested class?

Yes

No thank you

Parent/Guardian First /Last Name: _____

Parent/Guardian Home Phone Number: _____

Parent/Guardian Cell Phone Number: _____

Parent/Guardian Address: _____

Parent/Guardian Email: _____

Are you a SHYC Member: Yes Or No

I am a guest to SHYC and I would like to receive information about membership privileges:

Yes

No thank you

Additional Comments or Questions _____

Address (Winter): _____

Phone/Email (*best way to reach you during class hours*): _____

Please mail this completed form and check to:

Attn: Aidan Fowler Youth Sailing Coordinator and Waterfront Manager:

Stonington Harbor Yacht Club

PO BOX 87

Stonington, CT • 06378

If the person above is not available in the event of an emergency, notify:

First /Last Name/Relationship: _____

Parent/Guardian Home Phone Number: _____

Parent/Guardian Cell Phone Number: _____

Parent/Guardian Address: _____

Parent/Guardian Email: _____

Event: SHYC 2018 Private Instruction Form

Name of Parent/Guardian (please print)

Signature of Parent/Guardian

Date

Please mail this completed form and check to:
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