

TRIP RESERVATION FORM

Rock Hall, MD Chesapeake Bay June 23 – 25, 2012

(PLEASE PRINT)					
NAME				M [ĴF
☐ 2012 Sailing Club Member	☐ Non-Member (p	lease also complete and subn	nit mem	pership for	m)*
MAILING ADDRESS					
Address Line 1		Address Line 2			
City	State	ZIP			
PHONE (H)	(Other)	Email:			
☐ Smoker (S) ☐ Non-Smo	ker (NS)	fer to sail with non-smokers			
☐ Club-qualified and willing to Skipper (F	Please attach resume).				
☐ Club-qualified and willing to be First M	S ate				
My sailing experience to date is:					
ALSO RESERVE SPOT(S) ON TH		ANG I EOI LE.			
NAME			□ м	☐ F	S/NS
NAME			□ м	□ F	S/NS
NAME			П М	☐ F	S/NS
NAME	Ph		П М	☐ F	S/NS
ENCLOSE A CHECK (Payable to: The S	ailing Club, Inc.) FOR:				
people × \$100.00	people × \$360.00 afte	er May 9 TOTAL	:		
Mail to: Mary Ann Gord 2714 Packer Cou	900-5/	5-1457 gordon@myway.com			

Bridgewater, NJ 08807

^{*} Non-members: Everyone must be a Club member to sail on a trip. Please complete a membership application and it, membership dues, and completed trip reservation form to the name above. Membership forms are available in the Member's Trip Information Package, at the Club's website: www.TheSailingClub.org, or from the Trip/Assistant Trip Leader

^{**} Please use the back of this form to describe the sailing experience of others for whom you are reserving spaces.