



TRIP RESERVATION FORM

**Rock Hall, MD
Chesapeake Bay
June 15 – 17, 2013**

(PLEASE PRINT)

NAME _____ M F

2013 Sailing Club Member Non-Member (please also complete and submit membership form)*

MAILING ADDRESS

Address Line 1 _____ Address Line 2 _____

City _____ State _____ ZIP _____

PHONE (H) _____ (Other) _____ Email: _____

Non-Smoker (NS) Smoker (S) **NOTE:** Smoking is not allowed at any time, on deck or below. Prefer to sail with non-smokers

Club-qualified and willing to Skipper (Please attach resume).

Club-qualified and willing to be First Mate

My sailing experience to date is: _____

IF POSSIBLE, I (WE) WOULD LIKE TO SAIL WITH THE FOLLOWING PEOPLE:

ALSO RESERVE _____ SPOT(S) ON THE TRIP FOR :**

NAME _____ Ph. _____ M F S/NS

NAME _____ Ph. _____ M F S/NS

NAME _____ Ph. _____ M F S/NS

NAME _____ Ph. _____ M F S/NS

_____ people × \$100.00	_____ people × \$380.00 after May 1, 2013	TOTAL: _____
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Mail the following to the address at right:

- This form**
- Check made payable to *The Sailing Club, Inc.***
- Release of Liability and Zero Tolerance Form (copies available from the Club's website: <http://www.thesailingclub.org/forms/thisyear/ReleaseFormAllEvents.pdf> and the Trip Information Package)**

Bob DuBois
9 Militia Road
Whitehouse Stn, NJ 08889
908-534-1346
bobbyd16@yahoo.com

* **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.