



# TRIP RESERVATION FORM

San Francisco  
September 15 – 22, 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  Smoker  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 × \$250.00	SEE TRIP WRITE-UP FOR PAYMENT SCHEDULE	TOTAL: _____
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### Mail the following to the address at right

- Completed reservation form
- Check made payable to *The Sailing Club, Inc*
- Release of Liability and Zero Tolerance Form  
(copies available from the Club's website)

**Steve Krakauer**  
**11 Clark Ct.**  
**Basking Ridge, NJ 07920**      **908-306-0898**  
**stevekrak@gmail.com**

\* Non-members: Everyone must be a Club member to sail on a trip. Please complete a membership application and forward 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](http://www.TheSailingClub.org) or from the Trip/Assistant Trip Leader.

\*\* Please use the back of this form to describe the sailing experience of other sailors for whom you are reserving spaces.