



TRIP RESERVATION FORM

Day Sail on Barnegat Bay
Bayville, NJ
July 9, 2016

(PLEASE PRINT)

NAME _____

M F

2016 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

NOTE: Smoking is not allowed at any time, on deck or below.

Prefer to sail with non-smokers

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 × \$50.00	FULL AMOUNT DUE AT SIGNUP	TOTAL: _____
------------------------	---------------------------	--------------

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 (available from the Club's website: www.thesailingclub.org/forms/thisyear/ReleaseFormAllEvents.pdf and the Trip Information Package)

Mary Ann Gordon
2714 Packer Court
Bridgewater, NJ 08807
908-575-1457
maryagordon14@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 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.