

Lighthouse Charities, Inc. Youth Sailing Program

SAILING CAMP 2017

at the Oklahoma City Boat Club

Sailing Camp Fee Information

Sailing Camp Fee Schedule

Same as last summer!	SINGLE SESSION		THREE-SESSION DISCOUNT <i>Select any 3 Sessions</i>	
	OCBC Member	Non-Member	OCBC Member	Non-Member
Camp Fee	\$200	\$250	\$540	\$690
Deposit Due with Registration	\$50	\$50	\$150	\$150
Balance Due 1 st Day of Session	\$150	\$200	\$130 (X 3 = \$390)	\$180 (X 3 = \$540)

Deposits are *non-refundable* unless a session of choice is already full.

Camp Fees are *due in full the first day of the session* your child attends. For the Three-Session Discount, the balance for each session is due in full the first day of each session.

Discounts

- A child's parent or grandparent must be a current OCBC member to qualify for the OCBC Member Discount
- Three-Session Discount
 - You may select a combination of any three camp sessions.
 - A family may send different children to different sessions (e.g., send one child to two sessions and a second child to one session; or two children to one session and one child to one session).
- Additional discounts may become available in the future.

Scholarships Youth Sailing has a limited number of scholarships available on a first come, first served basis. The Sailing Camp Scholarship Application is posted on the Youth Program section of OCBC's website at okcboatclub.com.

Advanced Registration Sessions will be filled on a first come, first served basis. A *deposit holds your child's space* in the session(s) you select when you register in advance for Sailing Camp. We will contact you promptly if a session you select is full. Your child's registration, including the deposit, must be submitted and processed at least 3 business days before the first day of the session your child will attend.

Late Registration You may register your child on the first day of a session between 8:30 and 9:00 am. Remember, it is possible the session will already be full, in which case we will not be able to accommodate your child.

- Please download and complete all registration materials in advance
- Bring a check or cash for the full amount of the camp fee

Payment Policies

- A late payment charge of \$25 will be assessed if the camp fee is not paid in full on time.
- An insufficient funds charge of \$25 will be assessed for returned checks.
- Please ask for a written receipt if you pay with cash in person.

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Sailing Camp Registration

Sailor's Name _____			
Age: _____	Birth Date: _____	Sex: _____	
Grade just completed: _____	School: _____		
Youth's Cell Phone: _____	Email: _____		
Parent(s) Name(s) _____			
Primary Address: _____			
Street Address		City	Zip
Preferred Parent Email: _____			

Emergency Contacts Please <i>list names in the order</i> you would like us to contact in case of an emergency.			
# 1: _____	Mother Father Other: _____		Phone # 1: _____
	(please specify)		Phone # 2: _____
# 2: _____	Mother Father Other: _____		Phone # 1: _____
	(please specify)		Phone # 2: _____

Permission to Sign Child Out Please list individual(s) who are permitted to sign your child out of Sailing Camp.		
_____	_____	_____
Full Name	Phone	Relationship to Child
_____	_____	_____
Full Name	Phone	Relationship to Child

Medical Information	
Insurance Company: _____	Name of Insured: _____
Policy #: _____	Group #: _____
If your child has any medical conditions an emergency health care provider should be aware of (for example: asthma, serious allergy, seizures), please provide that information on a separate sheet of paper.	
_____	I have attached a separate sheet of paper detailing my child's medical condition.
(Initial)	

Sailing Camp Registration, continued

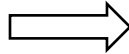
Photos/Videos

(Initial)

Please initial below if you *agree* to the following:
I give full permission to, and understand that, LCI and/or OCBC may take and use photos or videos of participants, volunteers, and their families for publicity purposes.

Sailing Camp Session(s)

Please indicate which session(s) you are registering your child to attend by checking the appropriate box(es)



Sessions will be filled on a first come, first served basis.

We will contact you promptly if a session you select is at capacity.

✓	SAILING CAMP SESSIONS
	Session 1: JUNE 5-9
	Session 2: JUNE 12-16
	Session 3: JUNE 19-23
	Session 4: JUNE 26-30
NA	Session 5: JULY 3-7 (not currently open)
	Session 6: JULY 10-14
	Session 7: JULY 17-21
	Session 8: JULY 24-28
	Session 9: JULY 31- AUG 4
	Session 10: AUG 7-11

Non-Discrimination Statement Lighthouse Charities, Inc. does not discriminate in its sailing education programs or activities, employment, volunteer participation, and grant/scholarship awards on the basis of race, color, national origin, religion, sex (including pregnancy), age (40 and over), disability (mental or physical), military status, and genetic information.

Information about ethnicity/race help us monitor one aspect of program accessibility and provide direction for future community outreach efforts. Responses to the following questions are optional.

- Do you consider your child Hispanic or Latino/a? (circle one) YES NO
- Which of the following racial designations best describes your child? (please indicate one or more choices):
 - ___ American Indian/Alaska Native ___ Asian ___ Black or African American
 - ___ Native Hawaiian or Pacific Islander ___ White ___ Other (specify): _____

Sailing Camp Registration Packet Check List

- Sailing Camp 2017 Registration
- Description of Child's Medical Condition (if applicable)
- ASSUMPTION AND ACKNOWLEDGMENT OF RISKS, RELEASE OF LIABILITY, AND MEDICAL AUTHORIZATION AGREEMENT (*Signed* at the bottom of *both* pages)
- A check for the appropriate deposit amount, made payable to *Lighthouse Youth Sailing Program*
- Sailing Camp Scholarship Application (if applicable)

Please mail your Registration Packet to:

Lighthouse Youth Sailing Program at OCBC
P. O. Box 20245
Oklahoma City, OK 73156

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**ASSUMPTION AND ACKNOWLEDGMENT OF RISKS, RELEASE OF LIABILITY,
AND MEDICAL AUTHORIZATION AGREEMENT**

In consideration of being allowed to participate in the Youth Sailing Program of Lighthouse Charities, Inc. ("LCI") at the Oklahoma City Boat Club ("OCBC"), for myself and any minor children for whom I am parent, legal guardian or otherwise responsible, and for my/our heirs, personal representatives or assigns, I agree as follows:

1. **AUTHORITY.** To the extent this agreement is signed on behalf of a minor, I expressly represent and warrant to LCI and OCBC and anyone acting on behalf of Youth Sailing that I have the full and absolute authority to enter into this agreement and to bind myself and the minor for whom I am acting to the terms and conditions set forth herein.
2. **ACKNOWLEDGMENT OF RISKS.** I acknowledge that there are risks associated with participating in the Youth Sailing Program including, but not limited to:
 - a. Changing water flow, tides, currents, wave action and boats; wakes;
 - b. Collisions with any of the following: other participants, the watercraft, other watercraft, and manmade or natural objects;
 - c. Wind shear, inclement weather, lightning, variances and extremes of wind, weather and temperature;
 - d. My sense of balance, physical coordination, my ability to operate equipment, swim and/or follow directions;
 - e. Collision, capsizing, sinking or other hazard which results in wetness, injury, exposure to the elements, hypothermia, and/or drowning;
 - f. The presence of insects and marine life forms;
 - g. Equipment failure or operator error;
 - h. Heat or sun related injuries or illnesses, including sunburn, sunstroke, or dehydration; and
 - i. Fatigue, chill and/or dizziness which may diminish my/our reaction time and increase the risk of accident.
3. **EXPRESS ASSUMPTION OF RISK AND RESPONSIBILITY.** I agree to assume responsibility for all the risks of Youth Sailing, whether identified above or not, even those risks arising out of the negligence of the releasees named below. My/our participation in the activity is purely voluntary. I assume full responsibility for myself and any of my minor children for whom I am responsible, for any bodily injury, accident, illness, paralysis, death, loss of personal property and expenses thereof as a result of any accident which may occur while I/we participate in the Youth Sailing Program, even if caused, in whole or in part, by the negligence of the releasees named below. I agree to wear a U.S. Coast Guard approved personal flotation device (PFD or life jacket) while sailing or riding in any watercraft. I agree to provide and require a minor for whom I am responsible to wear a life jacket while sailing or riding in any watercraft and at any other time as instructed by the Youth Sailing Program.
4. **RELEASE.** I hereby release LCI, OCBC, their principals, directors, officers, agents, employees, and volunteers, their insurers and each and every land owner, municipal and/or governmental agency upon whose property an activity is conducted and their insurers, if any, (collectively "Releasees") from any and all liability of any nature for any and all injury or damage (including death) to me or my minor children and other persons as a result of my/our participation in Youth Sailing even if caused by the negligence of any of the releasees named above, or any other person (including myself).

Youth's Name: _____

Parent/Guardian Initials: _____

ASSUMPTION AND ACKNOWLEDGMENT OF RISKS, RELEASE OF LIABILITY,
AND MEDICAL AUTHORIZATION AGREEMENT, continued

5. **MEDICAL AUTHORIZATION.** I authorize LCI and OCBC and each of the leaders of Youth Sailing to act for me in seeking and making decisions regarding medical care on my children's behalf if I am not immediately available or in the event of an emergency (which the leaders may determine in their sole discretion). My authorization includes the right, with the advice of a physician, surgeon or dentist, to consent to or approve the performance of any type of medical procedure or examination, dental procedure, or the prescribing of medication, and to execute all necessary documents in connection with any stay in or admission to any hospital and/or care facility. In giving this consent and authorization, I recognize and understand that in situations where my children require immediate medical or hospital care, it may not be possible to contact me or I may not be in a position to evaluate the available alternative treatments or the risks attendant to each and the risks attendant to foregoing all treatment. In such situations, I authorize a physician, surgeon or dentist to exercise his or her professional judgment and assess the risks involved and choose the appropriate treatment and to render such care and perform such treatment as he or she deems necessary or appropriate for the health, safety and welfare of my children.
6. **MANDATORY ARBITRATION.** Any claim arising from my participation or the participation of any minor for whom I have represented that I am responsible shall be submitted to mandatory arbitration pursuant to the rules of the American Arbitration Association or other mutually agreeable arbitration process.
7. **WAIVER OF JURY TRIAL.** For myself and any minor for whom I am responsible, I hereby waive and relinquish any right I/we may have to a trial by jury and agree that any dispute of whatsoever nature arising under this agreement or my/our participation in Youth Sailing shall be tried to a court of competent jurisdiction.
8. **VENUE.** Any dispute of whatsoever nature arising under this agreement or my/our participation in Youth Sailing shall be resolved through proceedings in Oklahoma County only.

I HAVE READ THIS ASSUMPTION AND ACKNOWLEDGMENT OF RISKS, RELEASE OF LIABILITY, AND MEDICAL AUTHORIZATION AGREEMENT. I UNDERSTAND THAT BY SIGNING THIS DOCUMENT I AM WAIVING VALUABLE LEGAL RIGHTS, INCLUDING ANY AND ALL RIGHTS I MAY HAVE AGAINST LIGHTHOUSE CHARITIES, INC., THE OKLAHOMA CITY BOAT CLUB, OR THE RELEASEES.

Youth's Name: _____

Parent/Guardian Signature: _____

Date: _____