

Riverside Community Sailing Program Summer 2025 <i>Class Registration for youth aged 10 to 17.</i> The cost per student is \$125 for each class. Classes are from 9 am to 1 pm, Mon. through Fri. Send Payment and Form to: RCSP c/o Linda Lawyer, 5690 Old Ranch Rd, Riverside CA 92504 ****SEE TIPS & RULES ON OUR WEBSITE**** * Swim Certification required FOR NEW STUDENTS Date _____ Lifeguard _____		#	Session	Level (Circle Choices)	Cost
		1	June 9-13	Beginning	\$125
		2	June 16-20	Beginning	\$125
		3	June 23-27	Intermediate	\$125
			June 30 – July 4	No Class	~~~
		4	July 7-11	Beginning	\$125
		5	July 14-18	Beginning	\$125
		6	July 21-25	Intermediate	\$125
		7	July 28-August 1	Advanced	\$125
			T-Shirts \$15 ea		XS / S / M / L / XL / 2XL / 3XL
Receipt & Information by Email			Total	\$	
You may register for more than one class					

Name _____

Birth Date _____ Age as of class date _____ Height _____ Weight _____ Girl / Boy _____

Emergency Contact (during class) _____ Phone _____

Parent/Guardian Name _____ Phone _____

Email address of Parent/Guardian – (for class confirmation & follow up) _____

Address _____ City/Zip _____

MEDICAL TREATMENT RELEASE - In case of emergency involving my child, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medications for my child. Medical providers are authorized to disclose to the adult in charge examination findings, test results, and treatment provided for purposes of medical evaluation of the participant, follow-up and communication with the participant's parents or guardian, and/or determination of the participant's ability to continue in the program activities.

Signature Parent/Guardian _____

Hold Harmless and Assumption of Risk Release Form - Injuries to participants in small craft programs may occur from risks inherent in the sport or activity; from placing stress on the body that it has not been prepared for; from accidents in learning or practicing techniques; from failing to follow training, safety or racing rules; from use of transportation to and from regattas, races, and other events, and from administration of first aid. For example, I might slip and fall; I might be struck by part of a boat; my boat might capsize or I might be thrown overboard into the cold water; I may hit another boat or run into an obstruction or onto the shore, and the collision may injure me. The severity of the injury can range from minor cuts, scrapes, or muscle strains to catastrophic injury such as paralysis or even death. I will be exposed to the weather, including rain, wind, cold, and sun. I might become ill through chill or suffer sunburn and heat exhaustion. In order to avoid injuries, I will obey the directions of my instructors and will follow all the safety rules. I will tell my instructor about any limitations or medical restrictions on my participation.

Student Signature _____ **Date** _____

BY SIGNING THIS DOCUMENT, YOU ARE GIVING UP YOUR RIGHT TO SUE _____ I understand that I am in no way required to participate in the above-named activity and that my participation is voluntary. _____ I understand that I must sign this release of liability if I would like to participate in the above-named activity. _____ I understand that the City of Riverside is permitted by law to require me to sign this release of liability before permitting me to participate in the above-named activity. I understand that by signing this document I am forever agreeing to indemnify and hold the Riverside Community Sailing Program, City of Riverside and its employees, officers, managers, agents, and council members harmless from all liability, loss or damage caused by or arising from their negligence, or those of others, including myself. I understand that I am agreeing to forever release from liability the Riverside Community Sailing Program, City of Riverside and its employees, officers, managers, agents, and council members and further agree to give up my right to sue them for all property damage, personal injury or wrongful death resulting from their negligence, my own negligence, or the negligence of others. My signature on this document will also prevent my heirs, assigns, representatives, legal guardians, or any person who may sue on my behalf, from suing as well. I understand that by participating in this activity, there are risks of physical injury to my person or property, as well as risks due to the negligent conduct of the Riverside Community Sailing Program, City of Riverside, and its employees, myself, or others, involved with the above-named activity. By voluntarily participating in the above-mentioned activity, I understand the risks of injury to my person and property and am assuming the risk of such. Refunds will not be granted. Fees, times, and dates of all programs are subject to change. Please be advised that all participants involved in any department programs or special events are subject to being photographed. Such photographs may be used by the Riverside Community Sailing Program and City of Riverside without an obligation to provide compensation to those photographed.

By signing below, I acknowledge and declare that I understand the legal consequences of this release.

Signature Parent/Guardian _____ **Signature Date** _____

Parent/Guardian: I declare under penalty of perjury that I am the parent/guardian of the minor. I have authority to enter into this agreement on behalf of the minor. I agree to be bound by its terms [if participant is a minor].