

# Shattemuc Yacht Club-Sailing Academy 2012

I would like to enroll my son(s)/daughter(s) for the 2012 season

Name.....age.....  
Name.....age.....  
Name.....age.....

Please check sessions desired:

- .....July session (\$1,100.00) Monday, June 25 through Friday, July 20
- .....August session (\$1,100.00) Monday, July 30 through Friday, August 24
- .....July and August session (\$2,100.00)

Membership status:....Regular....Intermediate....Associate....Junior

T-shirt size.....(included in Sailing Academy fee)

Enclosed is a check for the **non-refundable** deposit of \$250.00 per child. Make check payable to: **Shattemuc Yacht Club-Sailing Academy.**

Send application and check to:  
Karen D'Attore  
5 Knollwood Drive  
Ossining, NY 10562

Address.....

Phone.....

Email.....  
(Please print clearly)

Signature (by parent).....