



# II Dolphins Sailing

2006, 2007, 2008 & 2009 ASA Outstanding Sailing School and Instructor of the Year

Mailing Address: II Dolphins Sailing, 308 Lennox Pl, Wilmington, NC 28412

**Todays Date:** \_\_\_\_\_ **Your Name:** \_\_\_\_\_

- 1) Call 910.619.1646 Fax 910.795.4847 or email [info@iidolphins.com](mailto:info@iidolphins.com) to confirm your class and date
- 2) Print this application and mail to the above address
- 3) Drop in the mail along with a 50% deposit (Check) or Visa/Mastercard# (50% deposit)

[ ] Visa [ ] Mastercard: # \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ Exp date: \_\_\_\_ | \_\_\_\_

PLEASE TAKE THE TIME TO PRINT ALL LETTERS AND NUMBERS CLEARLY

Class Name \_\_\_\_\_ Start Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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Class Name \_\_\_\_\_ Start Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Class Tuition (See price sheet) \$ \_\_\_\_\_

Number of students X \_\_\_\_\_

Add \$39/Per Person If BKB-101 \$ \_\_\_\_\_ (ASA's 101 certification fee 1Oct07)

Total Tuition \$ \_\_\_\_\_

Attach 50% Deposit \$ \_\_\_\_\_ (You may pay in full if you wish)

Balance \$ \_\_\_\_\_ Due before course begins

**Last Name** \_\_\_\_\_ **First** \_\_\_\_\_ **Student #1**  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 Email: \_\_\_\_\_

**Last Name** \_\_\_\_\_ **First** \_\_\_\_\_ **Student #2**  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 Email: \_\_\_\_\_

**Last Name** \_\_\_\_\_ **First** \_\_\_\_\_ **Student #3**  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 Email: \_\_\_\_\_

**Last Name** \_\_\_\_\_ **First** \_\_\_\_\_ **Student #4**  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 Email: \_\_\_\_\_

Boats sailed \_\_\_\_\_  
 Chartered before? \_\_\_\_\_ Dingy Experience? \_\_\_\_\_  
 Future goals \_\_\_\_\_

### What do I need to bring?

1. Lunch and your choice of non-alcoholic beverage.
2. Boat shoes, water shoes or athletic shoes with white soles... NO sandals or bare feet allowed (toe protection required).
3. Suntan lotion with sunscreen and UV protection (no tanning oils please) summer sun is hot.
4. Swim wear, shorts, T-shirts and beach towel. If prone to sunburn bring long sleeve white shirt.
5. SAILING GLOVES and a baseball hat with clip to collar and/or wide brim hat with chinstrap.
6. Polarized SUNGLASSES with 100% UV is a must! Please bring CAMERAS – all kinds and a protective bag.
7. In case of rain shower bring lightweight foul weather gear and extra change of clothes if you like...The sun will dry you.
8. Bareboat (104) class requires several days of changes and personal items. Reconsider class if you are very high maintenance!
9. Advanced Coastal Cruising (106) requires sailing experience and proper study preparation prior to booking class date. See # 8.

**RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL  
CONSENT AGREEMENT  
("AGREEMENT")**

IN CONSIDERATION of being permitted to participate in any way in the **sailing** activity (Activity") I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of **sailing** Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.

2. I FULLY UNDERSTAND that: (a) **sailing** ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE **II Dolphins Sailing** their respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lesser of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releases, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PRINTED NAME OF PARTICIPANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

PHONE: \_\_\_\_\_

PARTICIPANT'S SIGNATURE (only if age 18 or over): \_\_\_\_\_

DATE: \_\_\_\_\_

**MINOR RELEASE**

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF \_\_\_\_\_ ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEE'S FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

PRINTED NAME OF PARENT/GUARDIAN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

PHONE: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18): \_\_\_\_\_

DATE: \_\_\_\_\_