



Pymatuning Sailing Club

2018 Sailing Camp Application

Please circle camp(s) you will attend: June 28 - 30 August 9 - 11

How many in the family will attend? Adults _____ children under 14 _____

How many will participate in classes? Adults _____ children under 14 _____
(Non-member Course participant fee is \$25.00 per person; those not participating are free)

Names of parent(s) or guardian(s) – Adult supervision is mandatory for junior attendance or participation. *Please note which will be participating vs. attending.*

Names/Ages of children under 14 – *Please note which will be participating vs attending:*

Will you camp on site? Yes / No Will you participate in group meals? Yes / No
Vegetarian? Yes / No

Do you own/have a sailboat(s)? Yes / No Will you be bringing it/them? Yes / No

If “Yes” to either, what type(s)? _____

Name, address, phone and email contact information of person filling out this form:

How did you hear about PSC Sailing Camp? (please circle)

- | | |
|-------------------------|---------------------------------|
| PSC Website | Crawford County Brochure or Mag |
| Invited by a Member | Word of Mouth |
| Am a PSC member | Been to the Camp Before |
| Other (please describe) | |

I understand that I am responsible for the safety of myself and my family.

PLEASE RETURN APPLICATION BY JUNE 1

Signed _____ Date _____

Return form to <mailto:tiniteach@hotmail.com> or
Mikki Wolfberg, Secretary, 19101 Van Aken Blvd. #501
Shaker Heights, OH, 44122 Phone: (216) 337-9277

Return form to <mailto:tiniteach@hotmail.com> or
Mikki Wolfberg, Secretary, 19101 Van Aken Blvd. #501
Shaker Heights, OH, 44122 Phone: (216) 337-9277