

**The Rudder Club of Jacksonville**  
**8533 Malaga Ave. Jacksonville, Fl. 32244**  
**904-264-4094**  
[office@rudderclub.com](mailto:office@rudderclub.com)  
[www.rudderclub.com](http://www.rudderclub.com)

**ADULT SAILING SCHOOL APPLICATION**  
**\$200.00 per session for Rudder Club members**  
**\$250.00 per session for non-members**

Name \_\_\_\_\_ EMAIL: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Hm/Wk phone \_\_\_\_\_

Date of birth \_\_\_\_\_ Sex(M/F) \_\_\_\_\_ Emergency contact# \_\_\_\_\_

Preferred sailing session \_\_\_\_\_

My swimming abilities are (circle one): Very good    Good    Average    I do not swim

My Sailing abilities are (circle one):    Never Sailed    Sailed once or twice

EACH PARTICIPANT MUST WEAR A COAST GUARD APPROVED TYPE III LIFE JACKET.  
(NOTHING AT THE BACK OF THE NECK)

By my signature, I agree to accept and abide by the regulations and sailing instructions for this series of classes. In consideration of being able to enter the above series of classes, being fully knowledgeable of the risks of sailing as a sport and recognizing of each class participant to decide whether to start or to continue a class. I voluntarily assume the risk of participation on the same and agree to hold harmless and Indemnify against any and all losses, and/or claims Incident Hereto, The Rudder Club of Jacksonville and/or personnel who are conducting the series of classes.

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Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Please make checks payable to THE RUDDER CLUB OF JAX**

FOR OFFICE USE ONLY

Course Instructor \_\_\_\_\_ Course date \_\_\_\_\_

Did applicant pass written test/on water test? \_\_\_\_\_ / \_\_\_\_\_ Date(s) \_\_\_\_\_

Certificate sent \_\_\_\_\_ By \_\_\_\_\_

Sailing card sent \_\_\_\_\_ By \_\_\_\_\_

Did applicant receive text book? \_\_\_\_\_ Date \_\_\_\_\_

Amount paid \_\_\_\_\_ Received by \_\_\_\_\_ Ck# \_\_\_\_\_