

# Morro Bay Junior Yacht Club 2008 Application

**{Note to current members: This must be filled out, signed by a parent, and returned with dues in order to continue your membership}**

Name \_\_\_\_\_ Age \_\_\_\_\_ Birth date \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Best Email address to use to communicate with Applicant: \_\_\_\_\_

Parents Names \_\_\_\_\_

Parent Work Phone \_\_\_\_\_ Parent Cell Phone (1) \_\_\_\_\_  
Parent Cell Phone (2) \_\_\_\_\_

Years Member of Morro Bay Junior Yacht Club \_\_\_\_\_ Successfully Completed Morro Bay Summer Sailing Class \_\_\_\_\_

Sailing Experience (circle one) under 10 hours 20 - 50 hours over 50 hours

Family Sailboat Ownership (circle one) Yes, if so what kind? \_\_\_\_\_ No

Please acknowledge that if accepted into the Morro Bay Junior Yacht Club you will do the following:  
[Failure to abide by one or more rules, may, in the discretion of the advisors, may be grounds for termination of membership.]

1. Follow all directions given by the adults sponsoring or supervising MBJYC activities.
2. Follow all rules of conduct and safety when at the Morro Bay Yacht Club Facility or while participating in any MBJYC event, including those rules set forth on the policy letter on premises of the Morro Bay Yacht Club.
3. Bring your own life jacket and wear a life jacket at all required times including while on dock or on a boat.
4. Not engage in horseplay, wrestling, or other inappropriate contact or harassment.
5. Be responsible for all equipment uses and return all equipment to its proper place after use.
6. Not leave the premises or event of the Morro Bay Yacht Club without the express permission of a Junior Advisor or adult in charge of supervision.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

## PARENTAL PERMISSION TO JOIN MORRO BAY JUNIOR YACHT CLUB RELEASE AND WAIVER OF LIABILITY ASSUMPTION OF ALL RISK AND INDEMNITY AGREEMENT CONSENT FOR MEDICAL TREATMENT

I give permission for \_\_\_\_\_ **[insert minor child's name]** to join the Morro Bay Junior Yacht Club (Hereinafter, "MBJYC") and to participate in all of its activities. I have discussed the foregoing rules with my minor child and agree, on his/her behalf, which he/she will act in accord with each rule listed on the front of this page and on the posted policy statement. I take full responsibility for my minor child's behavior while at the Morro Bay Yacht Club. I understand that the dues are \$60.00 per year and there is no refund nor pro-ration.

I understand that I am financially and otherwise responsible for any damage to any boat or property or any injury caused by my minor child's negligent or intentional behavior. I will instruct my minor



I HAVE READ, and/or IT HAS BEEN READ TO ME, this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement in its entirety. I fully understand its terms and I understand that I HAVE GIVEN UP SUBSTANTIAL RIGHTS that may belong to me and my minor child by signing it FREELY and VOLUNTARILY, without any inducement, assurance or guarantee being made to me. I intend my signature to be a complete and UNCONDITIONAL RELEASE OF ALL LIABILITY to the GREATEST EXTENT allowed by law, whether by signing on my own behalf or as the parent or guardian of a minor.

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### Consent for Medical Treatment

As the parent or legal guardian of \_\_\_\_\_ **[insert minor child's name,**  
I hereby give consent to the Morro Bay Yacht Club and/or the Morro Bay Junior Yacht Club to provide all emergency dental or medical care prescribed by a duly licensed physician (M.D.), osteopath (D.O.), dentist (D.D.S.) or paramedic to \_\_\_\_\_ **[insert minor child's name]** . selected by the Morro Bay Yacht Club to render medical treatment deemed necessary and appropriate. This care may be given under whatever conditions are necessary to preserve the life, limb, or well being of my dependent.

My child has the following medication allergies and other allergies: -  
\_\_\_\_\_

**PARENTS, PLEASE SIGN THIS IN THE PRESENCE OF A JUNIOR ADVISOR OR HAVE YOUR SIGNATURE NOTARIZED.**

**PARENTS, PLEASE ALSO PROVIDE US WITH THE \$60 DUES FEE IN A CHECK OR MONEY ORDER (SORRY NO CASH) AT TIME THE APPLICATION IS PRESENTED. NO APPLICATION WILL BE ACCEPTED NOR WILL AN APPLICANT BE ALLOWED TO PARTICIPATE WITHOUT SUCH PAYMENT.**

Legal Signature: \_\_\_\_\_ Signature of Spouse of Signing Party:

\_\_\_\_\_ Date: \_\_\_\_\_ Print Name(s)

\_\_\_\_\_ Address:  
\_\_\_\_\_

Legal Parent or Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Print

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

Address: \_\_\_\_\_

Witness Signature: \_\_\_\_\_ Print Name:

\_\_\_\_\_

Other person to reach in case of emergency: Name

Phone

Cell Phone