City Sail

City Sail provides students in 6th-12th grade the opportunity to learn to sail a 24-foot boat, to become a better leader and team player, and to make new friends. Students spend a week as a small crew learning to steer, navigate, handle sails, and calculate speed on 24' sailboats. They also learn about the Hudson River and its marine environment. Most importantly they learn about themselves. Many schools offer physical education credit for completing this program.

Structure

- For students entering 6th 12th grade
- Monday-Friday from 9am- 4pm with a break for lunch
- Participants sail in groups of 4-5 per instructor and are grouped by age
- Fast, fun, and safe 24 ft. sailboats
- No swimming or boating experience required

Location - Pier 66 boathouse in Hudson River Park, across from W. 26th St. and 12th Ave, Manhattan

Session Dates

Session 1: June 23-27Session 2: June 30-July 3

• Session 3: July 7-11

• Session 4: July 14-18

Session 5: July 21-25

Session 6:July 28-Aug 1

• Session 7: Aug 4-8

• Session 8: Aug 11-15

• Session 9: Aug 18-22

Session 10: Aug 25-29

Fees

For students who qualify for financial aid, the program can cost as little as **\$25 per week**. Hudson River Community Sailing strives to serve a diverse student body. Students and families pay on a sliding scale from \$25-\$475, depending on need.

Application Process

- 1. Fill out one City Sail Registration Form and Waiver Agreement for each child.
- 2. (Urban Assembly ONLY) For priority (first choice of program week and scholarship in amount of need), students must submit applications to their program/enrichment coordinator who will then turn applications in to The Urban Assembly by 5pm on **May 30**. Applications may also be submitted by dropping off at Pier 66 Boathouse (West 26th Street and Hudson River Park), or mailing to: **Hudson River Community Sailing, PO Box 20677 New York, NY 10011**.
- 3. As long as space is available, students may register and apply for financial aid by submitting application packets directly to Hudson River Community Sailing (Hudson River Community Sailing, PO Box 20677 New York, NY 10011) up until the Wednesday prior to each program session beginning.
- 4. You will be contacted by mail soon after receipt of your completed application forms and documentation. You will receive 2 identical letters of determination showing: 1) the session your child is enrolled for and 2) the amount of financial assistance being provided to you.
- 5. Please return one signed copy along with your payment (Check, Money Order, or Credit Card). If you have any questions, please call 212-924-1920 or email abaum@hudsonsailing.org.

Registration Checklist	
Registration Form	Waiver Agreement

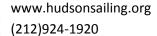


Birthdate	School		Gender (Circle On	e) Male	Female	
Mailing Address					Apt	t#
City, State, Zip						
Participant(s) Lives With (Circ	le all that apply)	Mother	Father	Guardian		
Mother/Guardian Name						
Phone		Email				
ather/Guardian Name				_		
Phone		Email				
Mark the session(s) you are i	nterested in attend	ing.				
Session 1: June 24-28	_	Session 5: July 22-26			_ Session	9: Aug 19-2
Session 2: July 1-5	_	Session 6: July 29-Aug 2			_ Session	10: Aug 26-3
Session 3: July 8-12	_	Session 7: Aug 5-9				
Session 4: July 15-19	_	Session 8: Aug 12-16				
O BE FILLED OUT BY THE PA	RTICPANT					
. Why do you want to be in t	this program? (Part	icipant)				
2. Why would you make a str	rong applicant? (Pa	rticipant)				

www.hudsonsailing.org (212)924-1920



FINANCIAL AID INFORMATION		RENT/GUARDIAN IF REQUESTING FINANCIAL AID)		
1. Total in Household				
3. Total household monthly income4. Total household monthly expenses5. Government Support? Y/N If yes, what type?				
at least \$25)				
7. Please explain, in your own v	vords, your financial need situa	tion.		
Program:	the appropriate line below) ho	w the participant will be picked up at the end of each day of the		
If the Sailor needs to leave early	y from our program on any give	Sailor will leave HRCS' facility on his / her own n day, HRCS must be notified no less than 48 hours beforehand in ant needs to leave early, please call 212-924-1920		
MEDICAL INFORMATION				
Emergency Contact Person:		Relationship:		
Emergency Contact Phone:	Alte	rnate Emergency Contact Phone:		
Physician:	Phone:	Name of Insured:		
Insurance Co.	Policy #: _	Group #:		
Chronic illnesses, medical condi	tions, allergies, or medication l	peing taken (please list here, or write "None"):		
		ogram, or an adult who bears this document, to authorize emergence ent or Guardian cannot be reached at the above telephone number		
Signature of Parent/Guardian		Date		





WAIVER AGREEMENT

Sailor's Name:		Parent/Guardian:		
	PLEASE PRINT		PLEASE PRINT	

The undersigned is the Parent or Guardian of the Sailor named above (hereinafter referred to as the "Sailor"), and hereby acknowledges that the execution of this Agreement is a condition to the participation of the Sailor in the activities of the Hudson River Community Sailing Program (hereinafter referred to as the "Program") as stated above. The undersigned accepts that the sport of sailing and the conduct of the Program entail and are subject to certain inherent risks, and, on behalf of the Sailor, accepts all risks on land and at sea of participation in the Program. In return for the Sailor participating in the activities of the Program and using the facilities and property of Hudson River Community Sailing (hereinafter referred to as "HRCS"), the undersigned does hereby agree as follows:

- 1. The undersigned consents to the participation of the Sailor in the Program and agrees that this will extend to the activities at Pier 66 and/or Pier 66 Maritime. This consent agreement shall remain in effect until HRCS receives written notice of the cancellation of this consent, or until the conclusion of the Program.
- 2. The undersigned consents to the participation of the Sailor in all sailing classes, clinics, events, and regattas, which are a part of the Program and acknowledges that said consent is **without exception** within the limits proscribed within.
- 3. The undersigned is aware that the activities of the Program involve maneuvering a boat, on deep waters, in potentially hazardous conditions which may include, among other things, strong winds and high waves, sudden and unexpected immersion in deep waters and collision with other watercraft or stationary objects such as docks, pilings, and buoys. With knowledge of the dangers involved, the undersigned voluntarily asks that the Sailor be allowed to take part in the activities of the Program.
- 4. The undersigned agrees that the Sailor will wear a personal flotation device at all times when participating in the Program's activities on the docks and on the boats.
- 5. The undersigned (including heirs, successors, and assigns) waives any claims against and releases any obligation of HRCS, and all of its respective members, employees, agents, or any other person acting in any capacity for the conduct of the Program in relation to any loss, injury, or damage, on land or at sea, to the Sailor or to the Sailor's property to the fullest extent permitted by law.
- 6. The undersigned (including heirs, successors, and assigns) is aware that HRCS is not responsible for the Sailor's travel to and from the Program and waives any claims against and releases any obligation of HRCS, and all of its respective members, employees, agents, or any other person acting in any capacity for the conduct of the Program with respect to any and all liability for any harm, injury, damage, cost or expense of any nature whatsoever, which may result to the Sailor during travel to the Program and after his / her departure from HRCS' facility.
- 7. The undersigned (including heirs, successors, and assigns) agrees to reimburse and hold harmless HRCS, and all of its respective members, employees, agents, or any other person acting in any capacity for the conduct of the Program for any loss, damage claim, or injury caused by the Sailor's negligence, misconduct, or failure to exercise reasonable care.
- 8. The undersigned grants permission for HRCS to use any photographs, film, digital imaging, videos, verbal, and written statements of the Sailor or his/her likeness for promotional, web usage, or other uses by HRCS, either associated with the Program, a project, an event, a function, or otherwise.

have thoroughly read and understand the Waiver Agreement. Agreement and agree to each of the provisions listed above.	By signing this document, I acknowledge the execution of this
Signature of Parent or Guardian:	Date: