



# Sailing School Application



Only one application necessary per group – second page is for additional students in your group

Course

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Course Dates

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Student's Name

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Address

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Email Address

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2<sup>nd</sup> Contact Name & Phone Number

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**It's important that we can reach you before your class. Please list your phone numbers and circle which pertains**

Phone 1    cell / office / home

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Phone 2    cell / office / home

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Phone 3    cell / office / home

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Student's age	Occupation	How did you hear about Bay Breeze or Solstice Sailing?
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Do you plan on boarding the boat the night before class starts (no extra charge)?    **Y / N / DECIDE LATER**

**OPTIONAL LEARNING CRUISE**

At the end of your class, you can reserve the boat you trained on for a "Learning Cruise". This is a 3-day cruise where you're the skipper and you can practice the skills you learned without the instructor on board. The boat sleeps up to 5 and it's just you and your friends and family. Call the office for pricing and availability.

**Call our sales office ASAP if you'd like to reserve this 3-day learning cruise.**



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**Tell us a little more about you and your group!**

Name	Age	Sailing Experience (none required but briefly describe if some)

Do you or does anyone in your group have concerns about their ability to physically move around on deck or take part in the sailing? If so, please explain:

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Please make a note below if there's anything you'd like your instructor to know about you before arriving for your class:

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Thanks and we look forward to sailing with you!

Send back to:

**FAX: 231-932-1130    EMAIL: baybreeze@bbyc.com    OFFICE: 231-941-0535  
12935 W. Bay Shore Drive    Suite 185 Traverse City, Michigan 49684**