Registration Form

STUDENT INFORMATION	
Name:	
Address:	
Day Phone: Evening Phone:	( ) ( )
E-Mail Address:	
Attending with a friend?	◊ Yes Friends Name:_____ ◊ No
CLASS INFORMATION:	
Class Selected:	◊ Introduction to Sailing ◊ Basic Keelboat Sailing (BKB-101) ◊ Basic Coastal Cruising (BCC-103)
Class Start Date	Day:_____ Date: { / / }
Prefered Sailing Date: *(for Basic Keelboat Students)*	◊ Saturday ◊ Sunday
Alternate Class Start Date:	Day:_____ Date: { / / }
PERSONAL INFORMATION	
Sailing Experience:	5 4 3 2 1 Vast None
Swiming Ability:	5 4 3 2 1 Able to Swim 200 Yards fully clothed Sink faster than a brick
Sailing Pursuits: *(why are you taking this class)*	
Special Requirements: *(travel limitations, physical limitations, etc)*	

To secure your class, return this form with a $ 100 deposit to:
Odyssey Sailing School
857 Pebblefield Terrace.
St. Louis, MO 63021
(*Deposit is refundable up 10 days prior to first class*)