



Sail Georgina Community Sail Program Proficiency Check List

The Sail Georgina Community Sail program is available to current Community Sail members only. This form will assist Sail Georgina Executive in determining your proficiency sailing a dinghy. This sheet must be completed by one of the Sail Georgina Executive members before you can take a club Boat out. This form is only to reduce the likelihood of damage to the dinghy – you are solely responsible for ensuring your safety, the safety of your passengers and for only sailing in weather conditions that are within your ability to sail. You are not renting the boat. All damages must be reported back to the Executive ASAP; furthermore, you are responsible for the cost of any repairs resulting from damage to the boats caused by you while signed out by you.

Executive _____

Member _____

Must show proof of the following:

- _____ Is a Community sail cardholder
- _____ Is 18 years of age or older

Must demonstrate **all** of the following:

- _____ Can rig a CL
- _____ Can take down the sails
- _____ Can fold and properly store sails
- _____ Is able to sail out of and back into the harbor

Must have successfully completed **one** of the following:

- _____ White sail one or the equivalent (Please explain: _____)
- _____ Pleasure Craft Operators Card.
- _____ Power Squadron Basic Boating Course

I understand that it is a condition of my participating in this program that I do so at my own risk. Therefore, in consideration of my acceptance of entry into this program, I agree to save harmless and keep indemnified Sail Georgina, the host club, the instructors, the organizers and their respective agents, officials, servants and representatives from all claims, actions, costs, expenses and demands in respect to death, injury, loss or damage to my person or property, howsoever caused, arising out of or in connection with my taking part in this program, notwithstanding that the same may have been contributed to or caused or occasioned by the negligence of the same bodies or any of them, or their agents, officials, servants or representatives. I further understand and agree that this release is binding upon heirs, my executors, assigns and myself.

Name (please print)

Members Signature

Name (please print)

Executives Signature

In case of emergency, please provide a contact phone number: _____

(Date Completed) _____