



Breakwater Yacht Club

51 Bay Street P.O. Box 2601

Sag Harbor, New York 11963

Fax 631-725-5590 Email www.Breakwateryc.org

2008 Adult Sailing Application

Name _____

Mailing Address _____

Phone # _____

Email _____

Please check the preferred lesson schedule:

Thursdays from 5:30 to 8:00 p.m.
July 3,10,17 and 24

Saturdays from 8:30 to 11:00 a.m.
August 2,9,16,23

Each four week session is \$400.00

Please include your check for \$400.00 made out to Breakwater Yacht Club and mail the completed form to the above address.

We do request that all applicants can swim and tread water. We reserve the right to check swimming abilities if needed.

Any further questions please call Laura White @ 631-478-8385