

ABYC Spring Junior Sailing 2012



Alamitos Bay Yacht Club
February - May 2012

ABYC Beginner/Intermediate Sabot Program

Spring 2012

Target Group: Beginner and Intermediate level sabot sailors. Intermediates must have taken a summer or fall junior sailing class.

Focus: This class will focus on basic sailing knowledge, boat handling skills and control. We will teach the parts of a sabot, rigging the sabot, how and why a boat moves, steering, sail trim, proper weight placement, and observation of the wind and water. Our goal is to increase the sailor's ability and confidence on the water. This is a non-racing class, but comfortable sailors may be encouraged to try their skills at ABYC regattas.

Daily Schedule for Beginner/Intermediate Clinics:

8:30-9:00am	Rig (must be rigged by 9:00am!)
9:00-9:50am	Lecture on topic and description of drills
9:50-11:50am	On-water practice
11:50-12:30pm	De-rig/Debrief

<u>Date</u>	<u>Event</u>	<u>Location</u>	<u>Time</u>
Feb 5	Spring Jr. Clinic #1	ABYC	8:30am-12:30pm
Mar 3-4	Manning Regatta	ABYC	9:00am-4:00pm
Mar 18	Spring Jr. Clinic #2	ABYC	8:30am-12:30pm
Apr 1	Spring Jr. Clinic #3	ABYC	8:30am-12:30pm
Apr 22	Spring Jr. Clinic #4	ABYC	8:30am-12:30pm
May 20	Spring Jr. Clinic #5	ABYC	8:30am-12:30pm
May 26-27	Memorial Day Regatta	ABYC	9:00am-4:00pm
June 10	Spring Jr. Makeup Clinic (if needed)	ABYC	8:30am-12:30pm

*All Sabot clinics are held on Sundays. The regattas listed above are listed for your information. If you sailor progresses, is comfortable in the boat, and can get around a course you may wish to try one of these local regattas.

Cost: The cost per student is \$165 for members and \$200 for non-members for the Beginner and Intermediate program. Regatta coaching is included in the program fee for the regattas listed above. Charter boats are available for \$175 for the season for members, or \$200 for non-members, plus a \$50 deposit that is refunded at the end of the season provided the boat is returned in good condition and with all parts. If you wish to charter a boat, you will need to complete a separate Charter Agreement. Please contact the Junior Sailing office to reserve a charter boat.

Contact Information:

Attention: Jennifer Golison
Alamitos Bay Yacht Club
7201 East Ocean Boulevard
Long Beach, CA 90803
Email: abyc.jrprogram@gmail.com
Club Phone: 562.434.9955 ext. 22

ABYC Sabot Racing Program – Spring 2012

Target Group: Racing sailors – Sabot A, B, C1, C2 & C3 sailors.

Racing Class Focus: This class will focus on simple racing tactics for the C sailors and more advanced racing tactics for the A, B and C1 sailors, including starting tactics, favored side of the race course, playing wind shifts, mark roundings, sailing rules, advanced starting tactics, and much more. We will also focus on advanced boat handling skills, longer courses and fine-tuning the racing skills by analyzing each leg of the course. All Sabot clinics are held on Sundays.

Daily Clinic Schedule for Sabot Racing Clinics:

9:30-10:00am	Rig
10:00-10:30am	Lecture on topic and description of drills
10:30-12:00pm	On-water practice
12:00-12:45pm	Lunch
1:00-1:30pm	Lecture
1:30- 3:30pm	On-water drills
3:30-4:00pm	Derig/Debrief

Date	Event	Location	Time
Jan 14-15	Junior Invitational (North #3/4)	SDYC	9:00am-4:00pm
Feb 5	Spring Jr. Clinic #1	ABYC	9:30am-4:00pm
Feb 18-19	SCYA Midwinter Regatta	NHYC	9:00am-4:00pm
Mar 3-4	Manning Regatta	ABYC	9:00am-4:00pm
Mar 10-11	Spring Gold Cup (North #4/4)	NHYC	9:00am-4:00pm
Mar 18	Spring Jr. Clinic #2	ABYC	9:30am-4:00pm
Apr 1	Spring Jr. Clinic #3	ABYC	9:30am-4:00pm
Apr 22	Spring Jr. Clinic #4	ABYC	9:30am-4:00pm
May 20	Spring Jr. Clinic #5	ABYC	9:30am-4:00pm
May 26-27	Memorial Day Regatta	ABYC	9:00am-4:00pm
June 10	Spring Jr. Makeup Clinic (if needed)	ABYC	9:30am-4:00pm

Cost: The cost per student is \$250 for members and \$300 for non-members for the Racing Program. Regatta coaching is included in the program fee for the regattas listed above. Charter boats are available for \$175 for the season for members, or \$200 for non-members, plus a \$50 deposit that is refunded at the end of the season provided the boat is returned in good condition and with all parts. If you wish to charter a boat, you will need to complete a separate Charter Agreement. Please contact the Junior Program to reserve your charter boat.

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ABYC Novice Laser/Laser Radial Program – Spring 2012

Target Group: Sailors new to the Laser/Laser Radial. Previous sailing experience and instruction is highly recommended for this class. On the water practice will take place primarily on the bay. We need at least 3 boats to ensure a class.

Class Focus: This class will focus on learning how to sail and control a Laser, including the fundamental topics of weight placement, steering, and sail trim. As the students progress, we may introduce some racing and more advanced boat handling topics as well. If the students progress at a rapid rate or are more experienced, we will teach more advanced racing tactics, including advanced starting tactics, favored side of the race course, playing wind shifts, mark roundings and sailing rules. All Novice Laser Clinics are held on Sundays from 9:30am to 4:00pm.

Daily Schedule for the Novice Laser/Radial Clinics:

9:30a – 10:00a	Rig
10:00a – 10:30a	Lecture on topic and description of drills / lunch
10:30a – 12:15p	On-water practice
12:15p – 1:00p	Lunch
1:00p – 1:30p	Lecture
1:30p – 3:30p	On-water drills
3:30p – 4:00p	Derig/Debrief

<u>Date</u>	<u>Event</u>	<u>Location</u>
Feb 5	Spring Jr. Clinic #1	ABYC
Feb 18-19	SCYA Midwinter Regatta (Ullman/Frost #3/4)	SDYC
Mar 3-4	Manning Regatta	ABYC
Mar 18	Spring Jr. Clinic #2	ABYC
Mar 23-25	OCR & Laser Midwinters West (Ullman/Frost #4/4)	ABYC
Apr 1	Spring Jr. Clinic #3	ABYC
Apr 22	Spring Jr. Clinic #4	ABYC
May 20	Spring Jr. Clinic #5	ABYC
May 26-27	Memorial Day Regatta	ABYC
June 10	Spring Jr. Makeup Clinic (if needed)	ABYC

Cost: The cost per student is \$275 for members and \$300 for non-members for the Laser program. Regatta coaching is included in the program fee for the ABYC regattas listed above. Charter boats are available for \$175 for the season for members, or \$200 for non-members, plus a \$50 deposit that is refunded at the end of the season provided the boat is returned in good condition with all parts. If you wish to charter a boat, you will need to complete a separate Charter Agreement. Please contact the Junior Program to reserve a charter boat.

Contact Info:

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ABYC Novice Double-Handed Program – Spring 2012

Target Group: Skippers & crews new to the CFJ or C420. This class is for sailors looking for experience and to raise their comfort level in double-handed boats. We need at least 3 boats to ensure a class.

Double-Handed Focus: This class focuses on introductory tuning and handling of CFJs and C420s. We will practice primarily on the bay, focusing on boat handling and boat speed. As the class progresses we will teach more advanced boat tuning, boat handling, spinnaker work and racing principles. All double-handed clinics are on Sundays. Local regattas are listed above for your information, but are mostly for experienced racers. All double-handed clinics are held on Sundays from 9:30am to 4:00pm.

Daily Clinic Format:

9:30a – 10:00a	Rig
10:00a – 10:30a	Lecture on topic and description of drills
10:30a – 12:15p	On-water practice
12:15p – 1:00p	Lunch
1:00p – 1:30p	Lecture
1:30p – 3:30p	On-water drills
3:30p – 4:00p	Derig/Debrief

<u>Date</u>	<u>Boat</u>	<u>Event</u>	<u>Location</u>
Jan 28	CFJ	Shadden Series #3/4	SDYC
Feb 5	C420	Perry Series #3/4	USSCLB
Feb 5	All	Spring Jr. Clinic #1	ABYC
Feb 18-19	I420/CFJ	SCYA Midwinter Regatta	ABYC
Mar 3-4	All <20'	Manning Regatta (CFJ Shadden #4/4)	ABYC
Mar 10-11	C420	Perry Series #4/4	CorYC
Mar 18	All	Spring Jr. Clinic #2	ABYC
Apr 1	All	Spring Jr. Clinic #3	ABYC
Apr 22	All	Spring Jr. Clinic #4	ABYC
May 20	All	Spring Jr. Clinic #5	ABYC
May 26-27	All	Memorial Day Regatta	ABYC
June 10	All	Spring Jr. Makeup Clinic (if needed)	ABYC

Cost: The cost per student will be \$260 per person for members and \$300 per person for non-members for the double-handed program. Charter boats are available for \$175 for the season for members, or \$200 for non-members, plus a \$50 deposit that is refunded at the end of the season provided the boat is returned in good condition with all parts. If you wish to charter a boat, you will need to complete a separate Charter Agreement. Please contact the Junior Program to reserve a charter boat.

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ABYC JUNIOR SAILING PROGRAM APPLICATION

PART 1-Sailor Information

Please print. **One form per child please.**

First Name _____

Last Name _____

Mailing Address _____

City _____ Zip _____

Age ____ Birth Date _____ Yrs in Program ____

Sail # _____ Rack # _____ Locker # _____

Mother's Name _____

E-Mail _____

Home Phone: () _____ - _____

Work Phone: () _____ - _____

Cell Phone: () _____ - _____

Father's Name _____

E-Mail _____

Home Phone: () _____ - _____

Work Phone: () _____ - _____

Cell Phone: () _____ - _____

Skill Description – To help us place and instruct your sailor, please briefly describe his/her sailing experience:

Charter Boats

There are a limited number of charter boats available for a fee of \$175 for members or \$200 for non-members and \$50 deposit. These are assigned on a first come, first serve basis. If you wish to charter a boat you will need to complete a separate Charter Agreement. Contact the ABYC Junior Sailing Director for availability.

PART 2-Choose the class in which you wish to enroll:

Class	Day	Time	Program Fees		Amount
			Member	Non -Member	
____ Beginner/ Int. Sabot	5 Sundays	9:00am – 12:30pm	\$165	/\$200	\$ _____
____ Sabot Racing	5 Sundays	9:30am – 4:00pm	\$260	/\$300	\$ _____
____ Laser/Laser Radial	5 Sundays	9:30am – 4:00pm	\$260	/\$300	\$ _____
____ Double-handed	5 Sundays	9:30am – 4:00pm	\$260	/\$300	\$ _____
____ Charter Sabot, Laser or CFJ (or \$200 charter for non-members)		(\$175 + \$50 deposit)	\$225		\$ _____
Total fees due ABYC \$					_____

PART 3-Payment Method

1. Charge my ABYC account # _____

Member Name _____

Signature _____

2. Check # _____

3. VISA/Mastercard # _____ Exp. Date _____

Name of Cardholder _____

Signature _____

Important!

To assure your child's space in the program, please return this completed application and consent form with full payment ASAP to ABYC by mail or in person.

ALAMITOS BAY YACHT CLUB

CONSENT, WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY

I am the parent or legal guardian of _____ (“Child”). I request that the Child be allowed to participate at all Alamitos Bay Yacht Club (“ABYC”) junior program activities (“Activities”) and consent to such participation. I agree to be bound by the provisions of this document until ABYC receives written notice of the cancellation of this consent or until the end of the Activities. In return for the Child being permitted to take part in the Activities and to use the facilities and property of ABYC, I make the following promises and warrant the truth of the following facts:

- 1. FAMILIARITY WITH ACTIVITIES, CONDUCT OF CHILD:** I am familiar with the Activities. I understand officers and employees of ABYC are available to discuss the Activities if I should wish additional information. I also understand I am solely responsible for the arrival and departure of my Child at the beginning and end of each day’s Activities. I will not allow my Child to remain on the premises of ABYC after each day’s Activities without appropriate supervision or the written permission of ABYC. I agree that ABYC will have no responsibility for the supervision of my Child at times other than during the scheduled Activities. I will inform my Child that he/she is expected to cooperate with and follow the directions of the persons in charge of the Activities and to act in a manner consistent with the spirit of good sportsmanship and respect for the rights of others. I acknowledge and agree that any inappropriate behavior by my Child may be cause for his/her expulsion from the Activities or the ABYC junior program.
- 2. HEALTH OF CHILD, ABILITY TO SWIM:** My Child is in good health, and I know of no reason why he/she would be incapable of participating in the Activities. My Child knows how to swim. I will immediately notify the designated ABYC Activity supervisor if a change in my Child’s health or other condition would affect my Child’s ability to participate in the Activities.
- 3. WAIVER OF LIABILITY:** I waive and release any right I, my heirs, distributes, guardians, legal representatives and/or assigns, may have or acquire, to make a claim against, sue, attach the property of or prosecute ABYC or any of its members, directors, officers, agents, employees and affiliated organizations (“Releasees”) for monetary damages caused by injury to or death of my Child or damage to the property of my Child or myself arising from my Child’s participation in the Activities and/or use of the facilities and property of ABYC, whether or not the injury or damage results from the negligence or other action, except intentional acts, of any of the Releasees.
- 4. ASSUMPTION OF RISK:** I am aware that the Activities may involve maneuvering a boat or other watercraft on deep waters in potentially hazardous conditions which may include, among other things, strong wind and high waves, sudden and unexpected immersion in deep waters and collisions with other watercraft or stationary objects such as docks, pilings and buoys. With knowledge of the dangers involved, I voluntarily ask that my Child be allowed to take part in the Activities. **I ACCEPT ANY AND ALL RISKS TO MYSELF AND MY CHILD OF INJURY, DEATH AND PROPERTY DAMAGE ARISING FROM PARTICIPATION IN THE ACTIVITIES AND THE USE OF THE FACILITIES AND PROPERTY OF THE ALAMITOS BAY YACHT CLUB, WHETHER OR NOT CAUSED BY THE NEGLIGENCE OR OTHER ACTION, EXCEPT INTENTIONAL ACTS, OF ANY OF THE RELEASEES.**
- 5. INDEMNITY:** I agree to indemnify, release and hold harmless ABYC from any loss, liability, damage or cost, including reasonable attorneys’ fees, they may incur due to my Child’s

participation in the Activities and use whether or not such loss, liability, damage or cost results from the negligence or other action, except intentional acts, of any of the Releasees.

6. **AUTHORIZATION TO CONSENT TO TREATMENT OF A MINOR:** As the parent or guardian of _____, I authorize the adult into whose care my minor Child has been entrusted to consent to any emergency x-ray, anesthetic, medical or surgical diagnosis or treatment and hospital care which are deemed advisable by, and are to be rendered under the general of special supervision of any physician licensed under the provision of the Medical Practice Act. I understand that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power on the part of such an adult to give specific consent to all such diagnosis, treatment or hospital care which he or she in the exercise of his or her best judgment may deem advisable. Neither such a physician nor any organization involved assumes any financial responsibility for exercising this action. This authorization is given pursuant to California Family Code Section 6910.

Emergency Contact: _____

Relation to Child: _____

Daytime Phone: _____

Cell Phone: _____

Medical Concerns / Known Allergies:

Insurance Provider and Insurance Plan or Policy Number:

I HAVE CAREFULLY READ THIS DOCUMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT IT INCLUDES A WAIVER OF LIABILITY, AN ASSUMPTION OF RISK, AND PROMISE BY ME TO INDEMNIFY THE RELEASEES, AND I AGREE TO IT OF MY OWN FREE WILL.

SIGNATURE PARENT OR GUARDIAN

DATE

PRINTED NAME OF PARENT OR GUARDIAN