

SOS BAREBOAT CRUISING APPLICATION & WAIVER - FRANCE

Destination: FRANCE: Alsace Lorraine		Date: Sep 3-10, 2021, or Sep 10-17, 2021	
Name:			
Address:			
City:		State:	Zip code:
H. Phone		Cell:	
Email:			
Female <input type="checkbox"/> Male <input type="checkbox"/> Member <input type="checkbox"/> Non-Member <input type="checkbox"/> If Non-member, guest of whom:			
Emergency Contact:		Cell Phone:	Relationship:

This bareboat charter offers a choice between 2 one-week charters starting either Sept. 3 or Sept. 10, 2020

Basic Skills I-II completed* Yes_____ No_____ *Completing Basic Skills is mandatory.

I have special physical/medical limitations or needs. Please identify.

Sailing experience:	Special requests	Week Options
<input type="checkbox"/> Low	<input type="checkbox"/> I need a non-smoking boat	<input type="checkbox"/> I prefer Week I (SEP 3)
<input type="checkbox"/> Moderate		<input type="checkbox"/> I prefer Week II (SEP 10)
<input type="checkbox"/> Experienced	<input type="checkbox"/> I need a smoking boat	<input type="checkbox"/> I can do either
<input type="checkbox"/> First Mate		<input type="checkbox"/> I have already been invited to crew
<input type="checkbox"/> Skipper	<input type="checkbox"/> I am willing to skipper a boat on this cruise	

1. While SOS stresses safety in all its activities, sailing is not without risk. In signing below, I affirm that my health is good and that I assume any and all risk, whether onboard, swimming, or on shore. I will not attempt to hold SOS, its officers, or any member, Skipper, or First Mate liable for any injury, illness or damage incurred. I understand that I am not required to participate in any activity, and that my choice to do so is voluntary.
2. I recognize that it is my right and responsibility to accept or reject a particular boat and skipper (or crew if I am a skipper). If a crewmember, I understand that I must be invited by a skipper in order to sail on an SOS cruise. If I am not, I will have all deposited money returned, including the administration and travel insurance fees.
3. I agree to abide by the policies of SOS and the stated procedures of the Bareboat Cruising Committee and the commands issued by the skipper. I understand that failure to do so may result in my expulsion from the cruise. I will cheerfully share all crew duties.
4. I understand that once accepted for a cruise, I am responsible for the full payment of my share of the charter fee, and other costs unless a suitable replacement is secured, and that even then, I will be responsible for non-transferable costs including the SOS administrative fee (and travel insurance fee if not transferable).

Signature: _____ Date: _____

This Application, Waiver and Checklist should be completed, signed and sent to Sandra Rosswork, 511 Chesapeake Ave, Annapolis, MD 21403, together with a check payable to "Singles on Sailboats" or "SOS" in the amount of \$400 (\$460 for non-members) for the canal trip by March 15, 2021 or ASAP.

Travel

___ I understand that I am responsible for making my own flight and hotel arrangements prior to and after the sail.

___ I understand that **no** hotel rooms are currently reserved for Thursday, September 2 or Thursday, September 9, 2021. A hotel and transfer option is being explored and will be communicated to all participants.

Accommodations

___ I want to share a cabin with _____

___ I am willing to share a cabin with a same sex crewmember.

___ I prefer a single berth and will pay extra if necessary and if can be accommodated.

Travel Insurance

___ I understand that travel insurance is a requirement for this trip and is **NOT** included in the base cost of the trip. An estimate for travel insurance will be provided later.

___ I understand that SOS will apply for umbrella travel insurance on behalf of all the participants. A link from the insurance company will be sent to all participants placed on a boat. **I understand that I must use that link to secure a policy number under the umbrella for myself.**

___ **I understand that I will submit payment directly to the insurance company and I will not be permitted to travel until the policy has been paid.**

Cancellation Policy

___ I understand that if I cancel that I may not have any of my paid fees returned if a replacement cannot be found.

___ I also understand that even if a replacement is found that the administration fee is **not refundable** once I have been invited and accepted placement on a boat.

Signature

Date

Do not make travel and hotel reservations until you are confirmed on a boat.

Costs will be \$1,000 for 7-day trip (includes a \$60 Admin Fee) for members. Non-members - \$1,060.00.

Payments due as follows:

7-day trip (\$1,000)

With application \$400 or \$460 (nonmember)

March 15, 2020 \$300

June 15, 2020 \$300

The canal boats offered by "Le Boat" are either the 4 cabin (47') Magnifique, or the 3 cabin (43') Calypso. Four boats (2 Magnifiques + 2 Calypsos) will cruise Week I and cruise back Week II. Two boats are being held in reserve.

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