

RSYC Youth Basic Dinghy Sailing Programme

The intention of this programme is to enable children in the age range between 8-13 years to participate in the sport of dinghy sailing. The boats used will be the Royal Selangor Yacht Club's (RSYC) fleet of Optimist/ Laser sailing dinghies.





Training will be based at the Royal Selangor Yacht Club with classroom sessions at RSYC and practical training in various locations on the river.

The basic training course consists of eight individual sessions and three stages:

Stage One Designed to give a basic understanding of how a sailing boat works,

with some experience of steering and handling the boat.

Stage Two Pupils will learn a range of sailing skills and knowledge to

help them to become a confident sailor.

Stage Three Pupils will progress to rigging, launching and sailing in any direction

on their own.

Sessions will be scheduled every week on a Saturday, from 10.00 to 3.00 PM. At the end of the basic training course, pupils will have the option to proceed to advance courses which focus more on dinghy racing.

Class size is 6 - 10 trainees.

The ideal candidate will be:

- Between 8 13 years old
- Able to float and swim a short distance (life jackets will be compulsory at all times)
- Reasonably healthy not asthmatic, for example



Charges:

RSYC Member : RM 650.00 Non RSYC Member : RM 900.00

Charges are inclusive of, bottled water, life jacket, instructors and other safety apparatus.

The parents of each pupil will be required to sign an application form, together with a disclaimer that the Royal Selangor Yacht Club is not liable in the case of an accident.



ROYAL SELANGOR YACHT CLUB

OPTIMIST TRAINING REGISTRATION FORM

COURSE INTEREST (P	'lease check appropr	riate box)		
COURSE	DURATION	COURSI	E DATE	
Youth – Basic Dinghy	12 Sessions			
PARTICIPANT DETAIL	S			
Name:				
Gender:		Nationality:		
Identity Card No:		Birth Date:		
Passport No:				
Address:				
Tel:	Mobile:	Mobile:		
Email:				
SWIMMING ABILITY (P Non Swimmer Can Swim 25 metres MEDICAL INFORMATION		Can Stay A Can Swim	Well	
Prescription Medication:				
Medical Conditions:				
EMERGENCY CONTAC	CT:			
1. Name:	Tel No:	H/P No:		
2. Name:	Tel No:	H/P	No:	
SIGNATURE (Parents of	or Guardian of Traine	e)		
DISCLAIMER: I, RSYC takes all possib dangerous. I agree that loss or damage to any caused.	le safety precaution the RSYC shall not be	s, sailing and all wa be held responsible for	ater sports can be or any death, injury,	

Date: _____

Signature: