## U. S. COAST GUARD AUXILIARY FLOTILLA 14-4 Jacksonville Beach Florida ABOUT BOATING SAFELY – REGISTRATION

| CLASS DATE:                  | TIME: 8:00AM – 5:00PM |                  |                       |
|------------------------------|-----------------------|------------------|-----------------------|
| Name                         |                       |                  | M / F                 |
| Last                         | First                 | Initial          |                       |
| NOTE: Use Name on Photo      | School ID, D          | river License, e | tc. (not nickname)    |
| Home Address                 |                       |                  |                       |
| City                         | County                | State            | ZIP                   |
| Tel:                         | Email:                |                  |                       |
| Date of Birth                | MM/DD                 | /YYYY (Require   | ed for Boater Card)   |
| Prior Boating Class Y / N Ty | pe                    | When_            |                       |
| Boat Owned: Y / N Length_    |                       | Make:            | Sail / Power          |
| Boat Kept At                 | _Type (Inboa          | ard/ Outboard)_  |                       |
| Boating Experience (Years)   | Age                   | es of Children   |                       |
| Would you like a Vessel Saf  | ety Check? _          |                  |                       |
| Program Cost is \$25.00 per  | Single Partic         | ipant and \$5.00 | Per Additional Family |
| Parents must attend with Ch  | ildren - Both         | Single and Fam   | nily include one Text |
| Please make                  | o chacks na           | vahle to El OTII | ΙΙ Δ 1/1-/            |

## Please make checks payable to FLOTILLA 14-4

Pass Final Exam: FL Boater Card + Certificate of Completion

To turn in your course payment, please contact:

Bill Vaughan

Phone: (904) 955-7077
Flotilla 070-14-04
C/O Sea School
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