US SAILING INSTRUCTOR RECERTIFICATION FORM

NAME _____MEMBERSHIP # _____

ADDRESS _____
Street City State Zip

TELEPHONE (R)_____(B) _____ (F) _____

EMAIL_____CELL PHONE_____

I AM SEEKING RECERTIFICATION FOR THE FOLLOWING:
(You only need to recertify at the highest level of certification you have achieved within each program. Certifications are valid for three years)

Small Boat Program	Keelboat Program	Windsurfing Program	Powerboat Program
□ Level 1	□ Basic Keelboat	□ Level 1	□ Powerboat Instructor
□ Level 2	□ Cruising/CoNav		□ Cruising Power Instructor
□ Level 3	□ Coastal Passage Making		
	□ Celestial Nav		
	□ Offshore Passage Making		
□ $75	□ $75	□ $75	□ $75

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CURRENT SAILING EMPLOYER:_____

SUPERVISOR:_____ PHONE: _____

ADDRESS: _____
Street City State Zip

THREE YEAR EMPLOYMENT HISTORY (please attach another page if necessary)	
Course(s) Location:	How Many Students:
Address:	Date of Course(s):
Name of Supervisor and Title:	Phone:

RECERTIFICATION FEE $75 per program x ____ programs $ _____
US SAILING MEMBERSHIP 1 year $65; 2 years $120; or 3 years $160 $ _____
TOTAL ENCLOSED Check or credit card $_____
Visa MC AmEx Card Number:_____
Name on card:_____ Exp. date:_____
Signature:_____