

GLEAMING OCEAN SAILING PROGRAM STUDENT APPLICATION FORM

The deadline for applications is _____ Applications can be mailed to The Bluewater Foundation, 155 Montgomery Street, 12th Floor, San Francisco, CA 94104

STUDENT INFORMATION			
Last Name:	First Name	Date:	
Street Address			
City:	State:	Zip Code:	
Phone:	E-mail Address:		
Emergency Contact:	Phone:		
SCHOOL			
School Name:		Grade:	
Street Address			
City:	State:	Zip Code:	
Phone:	E-mail Address:		

Student only:

On a separate sheet of paper, please answer the following two questions in a short paragraph:

- 1.) What did you learn from sailing with The Bluewater Foundation?
- 2.) Why do you want to participate in the Gleaming Ocean Sailing program?

NOMINATOR INFORMATION			
Last Namo	First Name	Organization and Title:	
Street Address			
City:	State:	ZIP:	
Phone:	E-mail Address:		

<u>Nominator only</u>: On a separate sheet of paper, please tell us about the student you are nominating and why you think they would benefit from participating in the Gleaming Ocean Sailing Program.