# Michigan Sailing Club
# Boat School Log

Date ___/___/____ Day _____ Weather _____

| Instructor Name: | * Check ✓ if US Sailing Certified | What do you like (or not like) to teach? |
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| LEAD: | | |
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| Student Name: | Paid Mbr? | Signed Wvr? | Can Swim50? | Swim Check? | shoes valuables glasses | Number of previous lessons, &/or skills or tests to work on today: |
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