



Regatta Name: \_\_\_\_\_ Year: **20** \_\_\_\_\_ Date(s): \_\_\_\_\_

Boat Class: \_\_\_\_\_ Sail Number: \_\_\_\_\_

Entry Type:  Single  Junior Single  Double  Junior Double  Learn to Race

**PAYMENT**

Amount: \$ \_\_\_\_\_  Cash  Cheque

OFFICIAL USE ONLY

Registrar Signature: \_\_\_\_\_

**SKIPPER**

Name: \_\_\_\_\_

Home Club: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**CREW #1**

Name: \_\_\_\_\_

**CREW #2**

Name: \_\_\_\_\_

Home Club: \_\_\_\_\_

Home Club: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

**RELEASE AUTHORIZATION**

I have read and understand the "Official Racing Rules", provided with registration and agree to abide by them. I am aware that failure to submit this form to the Race Official at least 30 minutes prior to the start of the first race will result in my ineligibility.

In consideration of acceptance of this entry or my being permitted to take part in this event I agree to save harmless and keep indemnified Sail Canada, Ontario Sailing, the Fanshawe Yacht Club and Sailing School, its organizers and their respected agents, officials, servants and representatives from and against all claims, actions, costs, expenses, and demands with respect to death, injury, loss, or damage to any person or property, however caused arising out of or in connection with my taking part in this event, notwithstanding that the same may be caused or occasioned by the negligence of the same bodies, or any of them or their agents, officials, servants, or representatives. I further understand and agree that this Release is binding upon myself, my heirs, executors, and their assigns. I have read the above and agree to abide by those conditions.

**SIGNATURES**

Skipper: \_\_\_\_\_

Crew #1: \_\_\_\_\_

Crew #2: \_\_\_\_\_

**PARENT / GUARDIAN / WARD AUTHORIZATION**

**To be completed for entrants under 18 years of age.**

Each parent / guardian / ward contact below authorizes the regatta organizer or their assigns to sanction emergency treatment if he/she cannot be contacted at the time of the emergency.

**SKIPPER CONTACT**

Name: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Signature: \_\_\_\_\_

**CREW #1 CONTACT**

Name: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Signature: \_\_\_\_\_

**CREW #2 CONTACT**

Name: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Signature: \_\_\_\_\_