ENTRY FORM

Waldringfield Sailing Club - Laser Radial U21 Open Meeting 25th June 2017

Boat/ Sail Number	Boat Name	Helm's Club	
Helm's Name:	Age on 25 June 2017		

I agree to be bound by the Racing Rules of Sailing and all other rules that govern this event. In particular I have read Para 1 of the Notice of Race and confirm that I agree to its provisions and that my boat will conform to its requirements throughout the event.

Signature of Helm

The following section applies in the event that the above sailor is aged under 18 on 25th June 2017. In consideration of the helm being accepted as an entry for the event, I make the following statements,

1. I confirm that:
   a. The Helm is my dependant
   b. During the event the boat will have a valid and current third party insurance of at least £2,000,000.
   c. During the time the helm is afloat I will be available in or around the Club. If I am not able to be there I will inform the race office, in writing, of the name of the adult who will be acting in my place.
   d. I have read the Notice of Race and have made particular note of Para 2 which excludes my dependant's right to claim compensation in certain circumstances.
2. I warrant that:
   a. The boat is fit to sail and compete in the conditions in which she is likely to find herself and that she is properly fitted out for these conditions.
   b. That the helm is competent and fit to take part in the event and to sail and compete in those conditions.
   c. That I have disclosed any medical problems that might affect the helm during the event.
3. I acknowledge that I am responsible for the helm throughout the event and I undertake to prevent the boat and/or the helm from leaving the shore if for any reason my warranties above cease to be effective.
4. I agree to indemnify all and any of those responsible for or assisting in the organisation of the event from any claims made by the helm and I waive any claim that I may have myself against those people.

Name of Parent or Guardian of Helm

Address of Parent or Guardian of Helm

Home Telephone: Mobile Telephone:

Name & Signature of person acting in *loco parentis* if the parent or guardian is not attending the event (if sailor is Under 18)

Signature of Parent or Guardian of Helm

(required under all conditions)

IS THERE ANYTHING ELSE WE SHOULD KNOW ABOUT YOUR CHILD?

Entry Fee £15.00 BACS PAYMENT OR CASH ONLY PLEASE

Account Name - WSC Cadets / Sort Code - 60-24-45 / Account Number - 14640082

Please use Sail Number as a reference when making payment - thankyou.