

**PALM BEACH SAILING CLUB
FRED THOMAS MEMORIAL RACE
SATURDAY, NOVEMBER 5, 2015
REGISTRATION**

WAYS TO REGISTER

ONLINE go to Regattanetwork.com, or pbsail.org

MAIL Palm Beach Sailing Club, 4600 N Flagler Dr, West Palm Beach, FL 33407

DROP-OFF at the club office

EMAIL office@pbsail.org

FAX (561) 881-1424

SKIPPERS NAME _____

ADDRESS _____

EMAIL _____

CELL PHONE _____ HOME PHONE _____

YACHT NAME _____

SAIL NUMBER _____ CLUB _____

CLASS (select one)

____ PHRF with SPINNAKER

____ JIB (GENOA) & MAIN

____ TRUE CRUISING MULTIHULL

____ TRUE CRUISING MONOHULL

DO YOU HAVE A VALID PHRF SEF/MASF RATING ? ____ YES ____ NO

IF YES, WHAT IS RATING ? _____

IF NO: BOAT TYPE _____ MANUFACTURER _____

L.O.A. _____ BEAM _____ DRAFT _____ DISPLACEMENT _____

SPINNAKER _____ MAX. HEADSAIL SIZE _____

THE ASSIGNED RATER MAY CONTACT YOU FOR ADDITIONAL INFORMATION.

THIS PAGE REQUIRED (3)

REGATTA FEE

INCLUDES: YACHT'S RACE ENTRY, ONE EVENT T-SHIRT, ONE AWARDS DINNER

REGISTRATION through OCT 31 \$125
LATE REGISTRATION Nov 1- Nov 4 @ 5 pm \$150 \$_____

(NO REGISTRATION AFTER NOV 4 @ 5 pm)

ADDITIONAL AWARDS DINNERS
(Dinner seating is limited, purchase asap)

THROUGH OCT 31 \$50 pp
THEREAFTER \$60 pp #_____ \$_____

TOTAL \$_____

REGATTA FEE PAYMENTMETHOD

___ CASH ___ CHECK

CREDIT CARDS: ___ VISA ___ MC ___ AMEX ___ DISCOVER

CARDHOLDER NAME _____

CARD NUMBER _____

EXPIRATION ___/___/___ SECURITY CODE _____ ZIP CODE _____

CARDHOLDER SIGNATURE _____

REQUESTED EVENT T-SHIRT SIZE

___ S ___ M ___ L ___ XL

ADDITIONAL EVENT T-SHIRTS WILL BE AVAILABLE DURING SOCIAL EVENTS.

THIS PAGE REQUIRED (4)

THE WAIVER/RELEASE BELOW MUST BE SUBMITTED TO COMPLETE REGISTRATION

Skipper/Owner: _____ Date of Birth: _____
Emergency Contact _____ Telephone No. _____

PALM BEACH SAILING CLUB
2016 FRED THOMAS MEMORIAL RACE
NOVEMBER 5

WAIVER OF AND RELEASE OF LIABILITY, PLEASE READ CAREFULLY.
I, _____ fully understand and acknowledge that: (a) risks and dangers exist in my use of sailing equipment and my participation in sailing activities, classes, or instruction; (b) my participation in such activities and/or use of such equipment may result in injury or illness including, but not limited to: bodily injury, disease, strains, fractures, partial and/or total paralysis, death or other ailments that could cause serious disability; (c) these risks and dangers may be caused by the negligence of the owners, employees, officers, agents or club members of the Palm Beach Sailing Club, Inc. I hereby assume all risks and dangers and all responsibilities for any losses and/or damages, whether caused in whole or in part by the negligence or conduct of the owners, employees, officers, agents, or club members of Palm Beach Sailing Club, Inc.

I, on behalf of myself, my personal representatives and my heirs hereby voluntarily agree to release, waive, and discharge Palm Beach Sailing Club, Inc. and its owners, employees, officers, agents, or club members from any and all claims, suits, or causes of action for bodily injury, negligence, property damage, wrongful death, loss of services, or otherwise which may arise out of my participation in the 2016 Fred Thomas Memorial Regatta.

In consideration of your accepting my application to participate in the above event, I hereby waive, release and discharge any and all claims for death, personal injury or property damage which I may have, or which may subsequently accrue to me or my crew, as a result of my participation in yacht racing. This release is intended to release the promoters, sponsors, the Palm Beach Sailing Club, the officials, any involved municipalities and other public entities from and against any and all liability arising out of or connected in any way with my participation in yacht or sailboat racing, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. I further understand that serious accidents occasionally occur during yacht or sailboat racing and that participants in yacht or sailboat racing occasionally sustain mortal or serious personal injuries, and/or property damage, as a consequence thereof. I knowingly assume the risks of yacht or sailboat racing and release all of the persons or entities mentioned above whom might otherwise be liable to me or to my heirs or assigns for damages. I agree to abide by the rules, regulations, and sailing instructions of the Palm Beach Sailing Club, the NOR for this regatta/event and the United States Sailing Association.

I HAVE READ THE ABOVE WAIVER AND/OR RELEASE AND BY SIGNING IT AGREE IT IS MY INTENTION TO EXEMPT AND RELIEVE PALM BEACH SAILING CLUB, INC., AND/OR ITS OWNERS, EMPLOYEES, OFFICERS, AGENTS AND CLUB MEMBERS FROM LIABILITY FOR PERSONAL INJURY LIABILITY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE OF ACTION.

Signed This _____ Day of _____, 2016

Signed By Owner _____ Printed Name _____

MINOR PARTICAPANTS MUST COMPLETE & SUBMIT THE FOLLOWING

WARNING: YOU ARE SIGNING A BINDING RELEASE FORM. DO NOT SIGN WITHOUT READING EVERYTHING

NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN

READ THIS FORM COMPLETELY AND CAREFULLY, YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT EVEN IF PALM BEACH SAILING CLUB USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE THAT YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM PALM BEACH SAILING CLUB OR ITS REPRESENTATIVES IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND PALM BEACH SAILING CLUB AND ITS REPRESENTATIVE HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

I have read and attest that I agree with the above and all the terms on the front side of this document

Print Name of Minor _____ Date of Birth _____

Signature of Minor _____ Date ____/____/____

Print Name of Parent or Guardian _____

Signature of Parent or Guardian _____ Date ____/____/____