



cvrda



Good Acre
CVRDA

Please enter in capitals	
Event – Goodacre Cup and CVRDA	Date 29th, 30th, 31st August 2009
Class of Boat	Sail No Boat Name
Helm: (full)	Date of Birth
Date When Built (CVRDA only):	State of tune (CVRDA only)
Address	Day time telephone Mobile
Email	Club
Crew (full)	Date of birth
Address	Day time telephone Mobile

By signing this entry form, participants accept that: -

1. Competitors are entirely responsible for their own safety, whether afloat or ashore, and nothing whether in the Notice of Race or Sailing Instructions or anywhere else reduces this responsibility.
2. It is for the competitors to decide whether their boat is fit to sail in the conditions in which it will find itself. By launching or going on the lake, the competitors confirm that the boat is fit for those conditions and they are competent to sail and compete in them.
3. Nothing done by the *Organising Authority* nor any *organiser* responsible for any loss, damage, death or personal injury, however it may have occurred as a result of the boat taking part in the racing.
4. Each and every sponsor is in no way responsible for the running or the administration of the sponsored event on or off the water, and is not liable for injuries and mishaps incurred by competitors, regatta staff/volunteers or bystanders.
5. The provision of patrol boats does not relieve the boat of her responsibilities.
6. The boat is required to hold adequate insurance including insurance against third party claims in the sum of at least £2,000,000 (or the equivalent in any other currency).
7. Rights to use Names & Likenesses: Competitors automatically grant to the *organising authority* without payment the right in perpetuity to make, use and show any motion pictures, still pictures and live, taped or filmed television of or relating to the event

I/we agree to be bound by the Rules governing this championship as defined in the NOR, the Sailing Instructions and the Rules and Bye Laws of South West Lakes Ltd/Trust.

Signed Date

(for Helm and Crew)

Parent or Guardian Declaration (required if helm is under 18)

Under law, this helm/crew is my dependent and I accept the statements above. I confirm that my dependent is competent to take part and I am responsible for my dependant throughout the event. During the time my dependent is afloat I will be around the venue that is hosting the event or I will inform the race officer in writing as to my whereabouts and who is acting in loco parentis during my absence. I consent to my dependent participating in drug testing procedures and if asked, providing urine sample under observation for analysis at an accredited laboratory.

Signed

Name

Address

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Telephone

Mobile

Parent or Guardian Declaration (required if crew is under 18)

Under law, this crew is my dependent and I accept the statements above. I confirm that my dependent is competent to take part and I am responsible for my dependant throughout the event. During the time my dependent is afloat I will be around the venue that is hosting the event or I will inform the race officer in writing as to my whereabouts and who is acting in loco parentis during my absence. I consent to my dependent participating in drug testing procedures and if asked, providing a urine sample under observation for analysis at an accredited laboratory.

Signed

Name

Address

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Telephone

Mobile

Payment

Members (SWLT)	Non Members	Amount paid	Method	Date
£35	£40		CC CA CK	

