



Santa Cruz Yacht Club

Parental Release Form

2011 Laser NorCals Championships & US Sailing Area G Elimination
for the 2011 U.S. Singlehanded Men's and Women's Sailing
Championships
April 2 & 3 2011

ASSUMPTION OF RISK AND WAIVER OF LIABILITY

I hereby authorize my son/daughter, _____ to participate in the Santa Cruz Yacht Club 2011 Laser NorCals Championships & US Sailing Area G Elimination for the 2011 U.S. Singlehanded Men's and Women's Sailing Championships

The undersigned parent and/or natural or legal guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to the following:

In consideration of my son / daughter entry in this SCYC Regatta on behalf of myself, my heirs, successors and assigns, I hereby waive any and all claims, actions, suits and demands against Santa Cruz Yacht Club, and all sponsors of the event, all of which are incorporated herein, and their respective officers, directors, employees, and agents (all the forgoing hereby referred to as "the Hosts") for any personal injury (including death) or property damage resulting from the negligence or other acts of omission by the Hosts or any of them as a result of my participation in the Event and do hereby release and discharge the Hosts from them. I acknowledge that the sport of sailboat racing involves substantial risk of personal injury or even death and I hereby assume the risk of any such injury that may occur while participating in the Event. I agree to be bound by The Rules as defined in the Racing Rules of Sailing and by all other rules that govern this event.

Parent/Guardian signature

Date

Parent / Guardian print Name

Date

MEDICAL WAIVER

As the parent and/or natural or legal guardian of the minor named above, I give permission to administer any necessary medical treatment in the event of an injury or accident.

Parent/Guardian print name

Parent / Guardian signature

Date

Parent / Guardian Contact Information:

Home Telephone: _____

Cell Phone: _____

In case of emergency, whom else should we contact:

Name: _____

Home Phone: _____

Cell: _____