

ENTRY FORM - BURTON WEEK AT WEYMOUTH S C

SATURDAY 19th AUGUST - TUESDAY 22nd AUGUST 2017

SAIL NUMBER _____ BOAT NAME _____
HELM _____ CREW _____
CLUB _____ EMAIL _____
(Event information will be distributed by email, please write clearly)

Entry details: your names & boat details may be posted on the Burton Week Web Site
If you do not want certain information to be published please tick this box and advise by email.

I wish to enter for the following: (please tick appropriate box/s)

WHOLE EVENT OR FOR THE FOLLOWING DAYS Saturday Sunday Monday Tuesday

I wish to enter for the following subsidiary trophies (Tick as required)

Double Floor without foil Admirals Cup Shotgun Trophy Money Cup
 Corrigan Cup * Arrows Trophy Canter Trophy Grand Masters
 Clinker Trophy Coronation Cup Gill Super Crew Joe Yorke Trophy
 Tubs Trophy

* Qualification for a junior helm is: that they must be born on or after 20th August 1996.

RECEIPT OF ENTRIES - Entries must be received at the Secretary's address before 15th August 2017. After that date entries may be accepted at Weymouth Sailing Club during the periods of registration described in the Notice of Race, at the Race Committee's discretion.

Acknowledgement of Entries - Entries received by 15th August will be acknowledged by email. Sailing instructions etc. will be available on registration at the Race Office at Weymouth S. C.

Entries to: MRS JANET BLOOR WOODMAN'S LODGE, 52D SHAW LANE, HOLBROOK, DERBYS. DE56 OTG

	LATE ENTRY FEES		DISCOUNTED EARLY ENTRY if received by 2ND JULY 2017	
	Whole Event	(Day Rate)	Whole Event	(Day Rate)
Standard Entrants	£135.00	(£42.00)	£110.00	(£35.00)
Younger Helms' Fees (Younger Helms must be born on or after 20 th August 1994)	£70.00	(£22.00)	£55.00	(£18.00)
Arrows Trophy entrants' Fees	£70.00	(£22.00)	£55.00	(£18.00)
Burton Week Dinner £25.00 each		No of tickets.....	£.....	
PLEASE BOOK YOUR DINNER TICKETS WITH YOUR ENTRY				
TOTAL SUM ENCLOSED			£.....	

Please make cheques payable to "National Twelve Owners' Association".

PLEASE COMPLETE ALL THE FOLLOWING DECLARATIONS WHERE APPLICABLE.

EVENT DECLARATIONS

Please enter National Twelve No _____ for this event. The entry of the above boat is conditional on the owner/competitor racing the boat accepting these terms:

I agree to be bound by The Racing Rules of Sailing, and the bye-laws of Weymouth S.C. In particular I have read Paragraph 17 & 18 of the Notice of Race.

I understand that if the boat is in the charge of any person other than the undersigned, it is the responsibility of the undersigned to bring to the attention of the person in charge their responsibilities listed in the provision of this entry, the Notice of Race and the Sailing Instructions.

I understand RRS Fundamental Rule 4: The responsibility for a boat's decision to participate in a race or to continue racing.

I declare that during the event I will hold a valid and current third party insurance cover of at least £2 million. I declare that I hold a valid measurement certificate with a current signed buoyancy endorsement for the above boat. I agree to keep Weymouth Sailing Club and its officers indemnified against all or any third party claims that may arise in connection with my boat and/or the users thereof.

NB Please complete and sign all relevant sections on the reverse of this form.

EVENT DECLARATION SIGNATURES

Signed _____ Date _____

Name _____ Telephone _____

Address _____

If the above helm is under 18 years of age the parent/guardian must sign below to accept the above conditions and that the race organizers are not responsible at any time when the above named sails, and the sole responsibility for such yacht is that of the parent/guardian.

Signed _____ Date _____ e-mail _____

Name _____ Telephone _____

Address _____

MEDICAL DECLARATIONS AND EMERGENCY CONTACT DETAILS

VOLUNTARY MEDICAL INFORMATION, for your safety, in the event of an accident, and retained for the duration of the event only.

HELM
Any Medical conditions _____

Emergency Contact Name _____ Telephone _____

Address _____

CREW
Any Medical conditions _____

Emergency Contact Name _____ Telephone _____

Address _____

PARENTAL CONSENT DECLARATION - FOR NATIONAL TWELVE SAILORS UNDER 18 YEARS OF AGE

Sailor Name:			
Home Address:			
Date of birth:		Age:	
National 12 Sail No			
All parents should be aware that photography and video filming may take place which may be placed in the public domain. If you have any objection to this please indicate on this form.			

I the parent/guardian of the above **will / will not** (**please indicate which applies**) be present at Weymouth Sailing Club when he/she is sailing in the National Twelve Championships from 19th August to 22nd August 2017. In the event of any incident I can be contacted on:

Telephone number..... or on alternative telephone number.....

In the event of any incident or emergency I authorise the organisers to take whatever action is necessary to ensure the health and safety of the young person named above in accordance with the RYA Child Protection Policy and Guidelines.

Signed..... (Parent/guardian) Name (please print)..... Date.....

In my absence the person assuming responsibility in the event of any incident or illness will be.....who **will** be present on site at Weymouth Sailing Club 19th August to 22nd August 2017 and can be contacted on:

Telephone number..... or on alternative telephone number.....