

JAMESTOWN YACHT CLUB 2021 RACING ENTRY

Contact Information (All data is required)

Boat Name	
Sail #	
Type of Boat	
Boat Length	
Owner	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	
Member Club/Fleet	

Series/Class Applicability (Check Applicable Series and Class)

<input type="checkbox"/> Spring	<input type="checkbox"/> Spinnaker	<input type="checkbox"/> Non-Spinnaker
<input type="checkbox"/> Summer	<input type="checkbox"/> Spinnaker	<input type="checkbox"/> Non-Spinnaker
<input type="checkbox"/> Fall	<input type="checkbox"/> Spinnaker	<input type="checkbox"/> Non-Spinnaker
<input type="checkbox"/> Crew Rotation	<input type="checkbox"/> Spinnaker	<input type="checkbox"/> Non-Spinnaker

TO REGISTER, YOU MUST INCLUDE THE FOLLOWING:

- | | |
|--|-------------------------------|
| <input type="checkbox"/> Entry Form, including Waiver Form | MAIL TO: Cheryl Rienzo |
| <input type="checkbox"/> Current PHRF Form | 22 Top O' the Mark Drive |
| <input type="checkbox"/> Entry Fee | Jamestown, RI 02835 |
| <input type="checkbox"/> Late Fee, if less than 24 hours prior to 1 st race of series entered | |
| <input type="checkbox"/> US Sailing Member #, <i>if applicable</i> | #: _____ |

RACING FEES:

Members of JYC:	\$55.00 per series or \$80.00 for all series & specialty event.	\$ _____
Non-Members:	\$95.00 per series or \$130.00 for all series & specialty event.	\$ _____
Crew Rotation only:	\$25.00	\$ _____
Late Fee	\$30.00	\$ _____
USSA Member Credit	(\$5.00)	(\$ _____)

Total Paid: _____

Signature

Name (printed)	
Signature	

Date	
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WAIVER AND RELEASE

THIS DOCUMENT HAS IMPORTANT LEGAL CONSEQUENCES. YOU SHOULD GET APPROPRIATE LEGAL OR OTHER ADVICE BEFORE SIGNING IT.

1. I agree to be bound by *The Racing Rules of Sailing* and by all other rules that govern this event.
2. My crew and I recognize that sailing is an activity that has an inherent risk of damage and injury associated with it. We have read RRS Rule 4, Decision to Race and hereby acknowledge and agree that we are participating in this event entirely at our own risk.
3. I acknowledge and agree that neither the organizing authority nor the race committee, nor their members, will be responsible for
 - (a) any damage to the entered boat or my other property, or
 - (b) any injury to myself or my crew, including death, sustained as a result of the participation of myself, my crew and the boat in this event.
4. I hereby waive any rights I may have to sue the race organizers (organizing authority, race committee, protest committee, host club, sponsors, or any other organization or official) with respect to personal injury or property damage suffered by myself or my crew as a result of our participation in this event and hereby release the race organizers from any liability for such injury or damage to the fullest extent permitted by law.
5. I have taken all necessary steps to ensure that myself, my crew and the entered boat are adequately prepared for all possible contingencies, including appropriate safety equipment as may be required by law or that a prudent seaman would consider advisable.
6. I understand this document has important legal consequences and have consulted such legal and other advisors as I deem appropriate before signing.

Signature

Signature	
Boat Name	
Date	

JYC 2021 CAPTAIN/CREW LIST

Boat Name:	
Boat Type & Sail Number:	
Standard Number of Crew (ie. 9):	
Person In Charge of the Boat:	
Email:	
Primary Residence:	
Street Address	
Street Address line 2	
City ST ZIP Code	

Please list your crew members below:

Crew Member 1 Name:	
Crew Member 1 Phone:	
Crew Member 1 Email Address:	
Crew Member 2 Name:	
Crew Member 2 Phone:	
Crew Member 2 Email Address:	
Crew Member 3 Name:	
Crew Member 3 Phone:	
Crew Member 3 Email Address:	
Crew Member 4 Name:	
Crew Member 4 Phone:	
Crew Member 4 Email Address:	
Crew Member 5 Name:	
Crew Member 5 Phone:	
Crew Member 5 Email Address:	

Crew Member 6 Name:	
Crew Member 6 Phone:	
Crew Member 6 Email Address:	
Crew Member 7 Name:	
Crew Member 7 Phone:	
Crew Member 7 Email Address:	
Crew Member 8 Name:	
Crew Member 8 Phone:	
Crew Member 8 Email Address:	
Crew Member 9 Name:	
Crew Member 9 Phone:	
Crew Member 9 Email Address:	
Crew Member 10 Name:	
Crew Member 10 Phone:	
Crew Member 10 Email Address:	

I have read and instructed my crew to read the guidelines at ReOpeningRI.com on protecting your household and business, including wearing a mask.

Skipper Signature _____