

ENTRY FORM
2010 NORTH COAST WOMEN'S REGATTA
Edgewater Yacht Club
September 11th, 2010

Skipper's Name _____

Address _____

Phone _____

Email address _____

Yacht Club Affiliation _____

Yacht Name _____

Sail # _____ Make or Class _____

Rating* _____ if PHRF or JAM

*Please enclose a valid rating certificate required for yachts racing PHRF or JAM and a signed participant waiver.

Racing Class: (circle one)

PHRF JAM T10 Ensign J/22 Other _____

US Sailing Member # _____

By September 3, 2010:	\$40 for US Sailing Members
	\$45 for non-US Sailing Members
After September 3, 2010:	\$50 for US Sailing Members
	\$55 for non-US Sailing Members

Please mail a check for the appropriate amount payable to NCWSA with this entry form. The deadline is September 10th at 8pm.

Mail to:
North Coast Women's Sailing Association
PO Box 771502
Lakewood, OH 44107

-or-

Bring to Edgewater Yacht Club and drop it off at the office

2010 Participant Waiver

In order to participate in the North Coast Women's Regatta, each skipper must read and sign the following waiver.

Waiver must be received no later than 8pm September 10, 2010.

In consideration of allowing my boat to race in the North Coast Women's Regatta, I, the undersigned boat owner, or skipper, do hereby agree to abide by and be bound by The Racing Rules of Sailing, as issued by the International Sailing Federation and the Prescriptions of US Sailing, except as specifically changed or exempted by the published Notice of Race and the Sailing Instructions and any amendments thereto. I also do hereby waive release and cancel any and all claims which I may or hereafter have against the North Coast Women's Sailing Association, The Edgewater Yacht Club or US Sailing, their officers, trustees, members, employees, race administrator and any committee persons which do or does arise out of my participation or undertaking to participate in the North Coast Women's Regatta, except for acts which are not related to or necessary for this event. I will obtain and maintain appropriate liability insurance for damage or injury caused by my actions or negligence and I have read and understand Fundamental RRS 4 as to my being "... solely responsible for deciding whether or not to start or to continue racing."

Name of skipper (print)

Skipper's signature

Date

Emergency information (In the event of an emergency, please contact to following individual(s):

Name: _____ Phone #: _____

Name: _____ Phone #: _____