

## ENTRY FORM

2009 Lake Sailing Skiff Association <u>Pre- Regatta - Training Seminar</u> Friday July 3, 2009 <u>Please bring your own boat!</u>

## Hosted at Ashbridge's Bay Yacht Club, Toronto, Ontario, Canada

| I LEHOL I KINT CLEHIKET    |  |
|----------------------------|--|
| CK OFF YOUR CLASS OF BOAT) |  |
| CIIs                       |  |
| Laser                      |  |
| Other (Specify)            |  |
| Boat Name:                 |  |
| Crew:                      | ÷  |
| Club:                      |  |
| Address:                   |  |
| Phone:                     |  |
|                            |  |
|                            |  |
| Relationship & Phone):     |  |
| Policy No                  |  |
|                            | CK OFF YOUR CLASS OF BOAT) CIIs Laser Other (Specify) Boat Name: Crew: Crew: Club: Address: Phone: Email/Fax: Relationship & Phone): |

## Waiver of Liability:

By participating in this Pre-Regatta Training event, I understand that I voluntarily assume and am knowledgeable of the risks of sailing and I assume sole responsibility for myself, and the boat in which I sail. I agree to hold harmless and free of liability the Lake Sailing Skiff Association and the Ashbridge's Bay Yacht Club, and their members, employees, officers and individuals appointed as volunteers for this Regatta and the Canadian, United States and International Class Associations for any damage, material or personal, suffered by me during the race training or otherwise. I confirm that the Boat I am sailing is currently covered by damage and liability insurance and that it has passed its 2009 Buoyancy Test. I agree that the jurisdiction and venue will be Toronto, Ontario, Canada and that Ontario law will govern any arbitration or litigation.

| Docking Locat | ion: ABIC:                           | Other Club: |  |
|---------------|--------------------------------------|-------------|--|
| Signatures:   | Skipper:                             | Crew:       |  |
|               | Parent (For Sailors under 16 Years): |             |  |
|               | Dated:                               | Dated:      |  |
|               |                                      |             |  |

| To be completed b    | y Registration Desk only.   | Registra     | r: (Please complete & initial. | ) |
|----------------------|---|--------------|--------------------------------|---|
| Eligibility: • Regis | tration Fees: \$45.00 (Seminar +Lunch)                                  | Cheque:      | Cash:                          |   |
| Mail to:             | R. Helmer - c/o LSSA, 101 - 2554 Lundigan Dr., Mississauga, ON, L5J 3W1 |              |                                |   |
| Email Entry to:      | Rosemary Helmer - rhsailing@tcn.ca                                      | - Sign waive | r at Registration.             |   |