



INDEMNITY FORM

This form must be completed by every prospective competitor. No competitor will be permitted to race if this form has not been received or is incomplete in any way. This form is to be completed by the parent or guardian of each prospective entrant.

TO: The Port Curtis Sailing Club Inc.

Competitor's Name: (in full).....

Address

.....Postcode.....

Date of Birth

Dinghy Name

ClassSail No.

I
(Parent or Guardian).

of.
(Address)

Telephone No.

I hereby give permission for my son/daughter/ward
..... to compete.

I hereby release the Port Curtis Sailing Club Inc., ASP Ship Management and any representatives thereof from any claim or demean that I may have or deem myself to have on my behalf arising out of the regatta and indemnify the Port Curtis Sailing Club Inc., ASP Ship Management and any representatives thereof against any claim that may be made.

.....Signed

Date



INDEMNITY FORM

This form must be completed by every prospective competitor. No competitor will be permitted to race if this form has not been received or is incomplete in any way. This form is to be completed by the parent or guardian of each prospective entrant.

TO: The Port Curtis Sailing Club Inc.

Competitor's Name: (in full).....

Address

.....Postcode.....

Date of Birth

Dinghy Name

ClassSail No.

I
(Parent or Guardian)

of.
(Address)

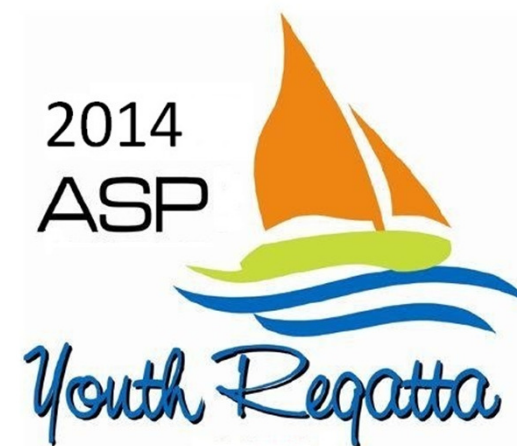
Telephone No.

I hereby give permission for my son/daughter/ward
..... to compete.

I hereby release the Port Curtis Sailing Club Inc., ASP Ship Management and any representatives thereof from any claim or demean that I may have or deem myself to have on my behalf arising out of the regatta and indemnify the Port Curtis Sailing Club Inc., ASP Ship Management and any representatives thereof against any claim that may be made.

.....Signed

Date



Port Curtis
Sailing Club Inc.

8th – 9th March 2014





2014 ENTRY FORM

(please print clearly in block letters)

Sail No.
Name of Boat
Class
SKIPPER
Given Names
Surname
Address
.....Postcode
Date of Birth
Club Handicap
CREW
Given Names.....
Surname
Address
.....Postcode
Date of Birth

Please accept my entry for the ASP Youth Regatta to be held on Saturday and Sunday 8th – 9th March 2014. I agree to be bound by the racing rules prescriptions and safety regulations of the Yachting Australia Racing Rules of Sailing 2013-2016 and as modified by the sailing instructors. **My boat has liability insurance of \$10 000 000.**

Signature Of Entrant
Date

ASP

Youth Regatta 2014

The Port Curtis Sailing Club Inc.
8th – 9th March 2014

AGE GROUP

Under 18 years

With the exception of the Open Mono (u18 with companion crew)
Division where the crew companion sailor can be 18 or over

ENTRY FORMS

Available from:

Port Curtis Sailing Club Inc.
PO Box 1070
Gladstone, QLD 4680
Or
www.gyc.com.au

ENTRIES CLOSE

6th March 2014
(Beach entries accepted)

All vessels entering this regatta must have liability insurance of \$10 000 000.

Proof of this is required.

PRIZES

➔ Prizes will be awarded in all divisions.

CLASSES

Youth Regatta over four races

- ➔ Junior Sabots/Optimist (2 in a boat) & u13 BIC
- ➔ Senior Sabots/Optimist (1 in a boat) & u16 BIC
- ➔ Open mono (u18 individual)
- ➔ Open Mono (u18 with companion crew)

RACES

- ➔ 4 race series
- ➔ Race 1 Saturday 1300
- ➔ Race 2 Saturday after race 1
- ➔ Race 3 Sunday 1100
- ➔ Race 4 Sunday after race 3