



113th Annual L.S.S.A. Dinghy Regatta

Port Credit Yacht Club

Clinic – June 29th Regatta – June 30th-July 1st, 2007



Registration Form *(Please print legibly)*

Class of Boat/Coach: _____ Coach (check box) Sail No: _____

Yacht Club: _____

Coach's Name _____

Skipper Name: _____ DOB: (m/d/y) _____ Sex: M F

Address: _____

City: _____ Province/State: _____ Country: _____

Postal/Zip Code: _____ Phone No.: _____ Email: _____

Crew Name: _____ DOB: (m/d/y) _____ Sex: M F

Address: _____

City: _____ Province/State: _____ Country: _____

Postal/Zip Code: _____ Phone No.: _____ Email: _____

Registration Fee: **\$50.00 per person (by June 21st, 2007) After June 21st, 2007 \$55 per person Coach \$15.00**

Payment Rec'd: Skipper \$ _____ Crew \$ _____ Coach \$ _____ Total: \$ _____
Paid By: Cash: _____ Cheque: _____ Visa: _____ Mastercard: _____

Payment Processed by:	_____
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Credit Card No: _____ Cardholder Name: _____ Expiry Date: _____

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Specialty Meals: (please describe requirements)

Emergency Contact: I will be onsite during the regatta **YES NO** (If yes please provide cell phone number, if available)
I am available to volunteer **ON LAND ON THE WATER I have a boat Contact me at this number:**

Name: _____ Phone No.: _____ Relationship: _____

Waiver: Before sailing I agree to read the rules and regulations issued for this event and agree to be bound by them. In consideration of acceptance of this entry or my being permitted to take part in this event, I agree to save harmless and keep indemnified my class association, The Port Credit Yacht Club, its organizers and their respective agents, officials, servants and representatives from and against all claims, actions, costs, expenses and demands in respect to death, injury, loss or damage to my person or property, howsoever caused arising out of or in connection with my taking part in this event notwithstanding that the same may have been contributed to or caused or occasioned by the negligence of the same bodies, or any of them, or their agents, officials, servants or representatives; I further understand and agree that this release is binding upon myself, my heirs, executors and assigns.

Skipper Name: _____ Signature: _____ Date: _____
Please Print (m/d/y)

Crew Name: _____ Signature: _____ Date: _____
Please Print (m/d/y)

If sailor is 18 or under, this waiver must be signed by a parent or guardian

Name: _____ Signature: _____ Date: _____
Please Print (m/d/y)

115 Lake Promenade, Mississauga, Ontario L5E 3G6
tel: (905) 278-5578 fax: (905)278-2519 www.pcy.c.net