

Pacific Inter-Club Yacht Association



“YOUTH” REGATTA 29 August 2009



Hosted by the Encinal Yacht Club, West Marine & International Order of the Blue Gavel

FOR YOUTH SAILORS (under age 18 years) ONLY:

MEDICAL/EMERGENCY INFORMATION:

NAME: _____

Should the participant be in need of medical treatment, do you give permission for this to be done in the event that the participant can not physically make a decision, or the guardian/ contact below can not be reached?

_____ YES _____ NO

Signature _____
(Parent or Guardian if participant is under 18)

In case of an emergency, please notify:

Name: _____ Home Phone # _____

Day Phone # _____ Cell Phone # _____

Doctor Name: _____ Phone # _____

Medical Plan Name: _____ Medical # _____

Last Tetnus Shot: _____ Allergies (food, medication), or special instructions:

Liability Release: For and in consideration of my (team's/child's) participation at this event held at the Encinal Yacht Club. I hereby accept all of the risks and responsibilities of participating in said regatta and it's events and waive any and all claims I (my team/my child) may have against the Pacific Inter-Club Yacht Association, the Encinal Yacht Club, West Marine and the International Order of the Blue Gavel, its members, officers, directors, committees, agents and/or employees arising out of or in any way connected with such participation.

Encinal Yacht Club

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