

RACE ENTRY FORM FOR:

The Devon Destroyer

12/13th December 2009

Return to:

Sailpower, University of Plymouth Students' Union,
University of Plymouth, Drake Circus, Plymouth, PL4 8AA

PLEASE COMPLETE THIS FORM LEGIBLY IN BLOCK CAPITALS

| | |
|-------------------|------------------------------|
| COMPETITOR | Contact number |
| Name: | |
| Address: | Email: |
| | Crew name |
| | Crew contact number |
| | Next of kin name and number. |

MEDICAL HISTORY

State any medical requirements we should be aware of:

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BOAT

| | |
|----------|------------|
| Class: | PY number. |
| Sail no. | |

INDEMNITY/DECLARATION

In signing this entry form I agree to be bound by the conditions in the advance programme, racing instructions and the general competition rules of the RYA, to accept the decisions of the organising committee and the officials nominated by it, to save harmless and keep indemnified the owners of the premises upon which the meeting is held, the organising club, the sponsors and MBC and their respective officials, servants and agents, other boat owners, and drivers engaged in the meeting against all actions, claims, costs expenses and demands in respect of loss or damage to the signatory's property or the property of his/her boat, car and crew, whether or not such loss or damage may have been contributed to or occasioned by the negligence of the said persons or bodies their officials, servants, representatives or agents.

Signed.....Name
.....Date.....
.....

PARENT/GUARDIAN

Persons under 18 must have written authority signed by either parent or guardian

Signed.....Name.....Date.....

RESTRAINT SYSTEM DISCLAIMER – Where applicable

I confirm that I have read and understood the MBC & RYA rules regarding systems and confirm that the boat entered for the event in which I am taking part has been constructed to and conform to these rules.

I further undertake not to hold the MBC and the RYA the Organising Club, or any of the servants or agents of the foregoing, nor any other person connected with the organisation of the event, responsible for any personal injury incurred by my wearing this restraint system.

Signed.....Name.....Date.....

Please return this form duly completed with
entry fee no later than
Saturday 11th December 2009
Cheques Payable to UPSU

| | |
|-----------------------|--|
| Entry Fee Please Tick | Double hander £30 () Single Hander £20 () |
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