



US SAILING
 PO Box 1260
 Portsmouth, RI 02871
 Bus: (401) 683-0800
 Fax: (401) 683-0840

DEPICTION RELEASE

The signed consent form MUST be on file in order to complete registration. One must be on file for each sailor.

In consideration for my participation in the U.S. Youth Multihull Championship event (“the “Regatta”), sponsored by US SAILING and Performance Catamaran, (collectively the “Sponsors”) and hosted by Alamitos Bay Yacht Club (the “Host”) from March 29 – April 1, 2007, the undersigned participant (“Participant”) and if such Participant is a minor, the Participant’s parent or legal guardian by countersigning below (“Parent/ Guardian”), hereby grant to the Sponsors and the Host, perpetually and irrevocably, the unconditional and exclusive right, title and interest throughout the world to use, simulate and portray Participant’s name, likeness, voice, personality, personal identification, and personal experiences, incidents, situations and events, whether visual and/or audio, including without limitation photographs, videotape, film and other recordings, electronic or optical-based media, or any other form or medium whatsoever, whether now or hereafter existing, and of every kind and character (collectively “The Images”), which may be taken or taken of Participant while participating in any aspect of the Regatta. Participant and Parent/Guardian understand and agree that one or more of the Sponsors and/or Host will be the owner(s) of any and all right, title and interest in and to the Images, in any derivative works, and in any merchandising, advertising, promotional and publicity rights and materials related thereto in all media of every nature whatsoever, whether now known or hereafter devised. Participant reserves no rights with respect to such uses. Participant and Parent/Guardian acknowledge the Sponsors’ and the Host’s right, title and interest in and advertisement, promotion, distribution and sale of products or events directly or indirectly related to the Regatta and/or yacht racing. Participant and Parent/Guardian agree that the Sponsors and the Host shall have unlimited right to vary, change, alter, modify, add to, and delete from any depictions of Participant in the Images and to rearrange and/or transpose such depictions as each may determine. Participant and Parent/ Guardian hereby waive any right to inspect, review or approve the Images and their use by the Sponsors and the Host and acknowledge that they are to receive no payment with respect to any matter referred to herein and that any and all of the rights granted herein are freely assignable by Sponsors and/or Host.

PARTICIPANT AND PARENT/GUARDIAN, ON BEHALF OF THEMSELVES AND THEIR RESPECTIVE HEIRS, EXECUTORS, ADMINISTRATORS, PERSONAL REPRESENTATIVES AND NEXT OF KIN (COLLECTIVELY, “RELEASERS”), HEREBY FOREVER WAIVE, RELEASE AND DISCHARGE EACH OF THE SPONSORS, THE HOST AND THEIR RESPECTIVE PARENTS, SUBSIDIARIES, AFFILIATES, OWNERS, MEMBERS, MANAGERS, EMPLOYEES, OFFICERS, DIRECTORS, AGENTS, SUCCESSORS, ASSIGNS AND REPRESENTATIVES (EACH A “RELEASED PARTY”) FROM ANY AND ALL CLAIMS, DEMANDS, OR CAUSES OF ACTION THAT RELEASORS MIGHT NOW OR HEREAFTER HAVE FOR LIBEL, DEFAMATION, INVASION OF PRIVACY, RIGHT OF PUBLICITY, INFRINGEMENT OF COPYRIGHT OR TRADEMARK, OR VIOLATION OF ANY OTHER RIGHT ARISING OUT OF OR RELATING TO ANY UTILIZATION OF THE RIGHTS GRANTED UNDER THIS DEPICTION RELEASE.

PARTICIPANT (Signature): _____

NAME (print) _____

DATE

PARENT OR GUARDIANS FOR MINORS (UNDER 18 YEARS OF AGE)

The undersigned parent and/or natural or legal guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to release each and all of the Released Parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said Party(ies) because of any defect in or lack of such capacity to so act and release said Party(ies) on behalf of all Releasers as specified herein.

PARENT OR GUARDIAN (Signature): _____

PARENT/GUARDIAN NAME (Printed): _____ **DATE:** _____



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RELEASE OF LIABILITY

In consideration of the undersigned's participation in the U.S. Youth Multihull Championship ("the Regatta") sponsored by US SAILING, Performance Catamaran (collectively, the "Sponsors") and hosted by the Alamitos Bay Yacht Club (the "Host") on March 29th – April 1, 2007 the undersigned participant ("Participant"), and if such Participant is a minor, the Participant's parent or legal guardian by countersigning below, on behalf of themselves and their respective heirs, executors, administrators, personal representatives and next of kin (collectively with Participant, "Releasers"), hereby forever waive, release and discharge each of the Sponsors, the Host and their respective parents, subsidiaries, affiliates, owners, members, managers, employees, officers, directors, agents, representatives, successors and assigns (each a "Released Party") from any and all claims, demands, damages, judgments, executions, rights of action or causes of action, present or future, whether the same be known, anticipated or unanticipated, which a Releaser may have, or claim to have, against any Released Party resulting from death, personal injury, property damage or other loss Releaser may sustain as a result of participating in the Regatta or other activities related thereto.

THIS RELEASE IS INTENDED TO DISCHARGE EACH RELEASED PARTY FROM ANY AND ALL LIABILITY ARISING OUT OF OR CONNECTED IN ANY WAY WITH RELEASOR'S PARTICIPATION IN THE REGATTA EVEN IF THAT LIABILITY ARISES OUT OF NEGLIGENCE OR CARELESSNESS ON THE PART OF ANY RELEASED PARTY.

Releasers hereby acknowledge that serious accidents occasionally occur during sailing activities and that mortal or serious personal injuries and/or property damage or other loss may result from participation in the Regatta. Releasers knowingly assume all risks of participation in the Regatta, including all risk of personal injury and loss of or damage to the Releasers or their property, including further injury sustained as the result of the efforts of third parties who come to the aid of Releaser(s) if injured as a result of participation in the Regatta, and release all other persons and entities mentioned above who might otherwise be liable to Releasers. Releasers agree to abide by all rules of the Sponsors and the Host in connection with participation in the Regatta and understand that the failure to observe and obey such rules may result in instant revocation of Releaser's(s') right to participate in the Regatta.

Signature of Regatta Participant: _____
Print Name: _____

PARENT OR GUARDIANS FOR MINORS (UNDER 18 YEARS OF AGE)

The undersigned parent and/or natural or legal guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to release each and all of the Released Parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said Party(ies) because of any defect in or lack of such capacity to so act and release said Party(ies) on behalf of all Releasers as specified herein.

Signature of Parent/Legal Guardian: _____

Print Name: _____ Date: _____



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ALTERNATE HOUSING CONSENT FORM

2007 U.S. Youth Multihull Championship

I, _____ (*parent/guardian name*) assume all responsibility for
 _____ (*competitor name*) during the U.S. Youth Multihull
 Championship regatta. I release the Alamitos Bay Yacht Club, US SAILING, all volunteers, and
 sponsors of all liability and responsibility during the Championship.

As a parent or guardian during this event, I agree that either I, or the adult that I have
 designated on this form, will be responsible for the competitor on a daily basis during the entire event,
 stay at the same privately arranged housing site, and coordinate transportation to/from housing site and
 the Alamitos Bay Yacht Club. I will assure all the rules of the Championship will be obeyed, including
 the curfew, illegal drugs and alcohol rules. ***I agree that I, or the adult I have designated,
 will be present at registration.***

Parent/guardian name (*please print*): _____

Address: _____

City/State/Zip: _____

Phone numbers: (w) _____

(h) _____ (cell) _____

Relationship to competitor: _____

Parent/guardian signature: _____ Date: _____

Name of Designated Adult: _____

Relationship to competitor: _____

Home address: _____

City/State/Zip: _____

Phone number: (w) _____ (h) _____ (cell) _____

over...



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The competitor will be staying at the following address for the duration of the event:

Name of hotel/ B&B/homeowner: _____

Room in name of: _____

Address: _____

City/State/Zip: _____

Phone: _____

.....
 Complete the following section before mailing, if at all possible. If not possible, the section will be completed at registration. **Remember that the designated adult must be present at registration.**

As designated by the parent/guardian of _____ (*competitor's name*), I agree that I will be responsible for the competitor on a daily basis during the entire event, stay at the same privately arranged housing site, and coordinate transportation to and from housing site and the Yacht Club. I will assure all the rules of the Championship will be obeyed, including the curfew, illegal drugs and alcohol rules. I also agree to be present at registration.

Print name: _____

Signature: _____

Phone number(s) during event: _____

Mail all forms ***no later than March 23,2007***:

Alamitos Bay Yacht Club
 Attn: Dan DeLave
 7201 East Ocean Blvd.
 Long Beach, California 90803
562-434-9955



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MEDICAL CONSENT FORM

Each participant must complete and sign a copy of this form. Please fill it out completely. Incomplete forms will not be accepted. *Mail all forms postmarked no later than **MARCH 23, 2007**.*

NAME OF PARTICIPANT: _____

NAME OF PARENT OR GUARDIAN (if under 18) _____

In the event of accident or injury to myself, my spouse or any child of mine (specifically including my child if named above as the "Participant") or in the event of illness of myself, my spouse or any child of mine while in, on or about the premises of the Alamos Bay Yacht Club or while participating in any activity sponsored by or under the auspices of the Alamos Bay Yacht Club under circumstances where I am physically unable to consent or am not present:

1. I hereby voluntarily consent to the furnishing to myself, my spouse or any of my said children of such medical care, attention and treatment by any hospital, physician or physicians as such hospital, physician or physicians may deem necessary or advisable.
2. I authorize the General Manager, Assistant General Manager or any officer or member of the Alamos Bay Yacht Club to consent to such medical care, attention or treatment.
3. I agree to pay all costs of such medical care, attention or treatment and to hold free and harmless of and from any and all liability for such cost the Alamos Bay Yacht Club, the United States Sailing Association and the officers and members of each.

I, the undersigned, do hereby authorize and consent to any x-ray examination, anesthetic, medical or surgical diagnosis or procedure rendered under the general or specific supervision of any member of the medical staff or of a dentist licensed by the State of California or of any hospital holding a current operating certificate issued by the State Department of Health. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power to render care which the aforementioned physician in the exercise of his best judgment may deem advisable. It is understood that effort shall be made to contact the undersigned prior to rendering treatment to the patient, but that any of the above treatment will not be withheld if the undersigned cannot be reached.

Signature: _____

Parent/Guardian Signature (if under 18): _____ Date: _____

IN CASE OF EMERGENCY CALL:

NAME	RELATIONSHIP	PHONE NUMBER

PHYSICIAN WHO CONDUCTED YOUR MOST RECENT PHYSICAL EXAMINATION:

NAME	PHONE NUMBER	DATE OF LAST EXAM

HEALTH INSURANCE CARRIER	INSURANCE ID NUMBER



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MEDICAL AND EMERGENCY INFORMATION page 2

Competitor's name: _____ Male ____ or Female ____

Address: _____

City/State/Zip: _____

Telephone _____ (home) _____ (Emergency cell) Date of Birth: _____

THE PARTICIPANT AND/OR THEIR PARENT(S) MUST RESPOND TO THE FOLLOWING QUESTIONS AS ACCURATELY AND COMPLETELY AS POSSIBLE:

Please check those that apply: (Provide necessary details below)

CHRONIC AILMENTS:		ALLERGIES:	
ASTHMA, OR OTHER RESPIRATORY PROBLEMS		MEDICATION (please list below)	
DIABETES OR HYPOGLYCEMIA		LATEX	
HEMOPHILIA, OR OTHER BLEEDING PROBLEMS		BEE STINGS/INSECT BITES	
CIRCULATORY OR HEART PROBLEMS		IF YES, DO YOU CARRY AN EPIPEN?	
EPILEPSY/ SEIZURE		FOODS	
OTHER		OTHER	

DATE OF LAST TETANUS/ DIPHTHERIA/ TOXOID SHOT: _____

CURRENT MEDICATIONS AND DOSAGE IF ANY: _____

DETAILS: _____

PLEASE MAKE SURE YOU HAVE FILLED IN ALL THE NECESSARY INFORMATION

If any of the above mentioned information changes before or during the event, please submit in writing all pertinent information to the regatta chairperson.

Mail all forms *no later than March 23, 2007*.

Alamitos Bay Yacht Club

Attn: Dan DeLave

7201 East Ocean Blvd.

Long Beach, California 90803

562-434-9955



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TRAVEL FORM

Name: _____

- I am driving
- I am flying

Phone numbers where you can be reached while traveling: (cell) _____

If driving, expected arrival time: _____

If flying, please complete the information below:

Airline/ Flight #/ Arrival Time (*please print*): _____

Airline/ Flight #/ Departure Time: _____

Airport _____

FOR YOUR SAFETY, use the transportation provided by Alamitos Bay Yacht Club. If you have any questions or problems while traveling, please contact the chair at the number below:

Mail all forms ***no later than March 23, 2007***.

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