

CABRILLO BEACH YACHT CLUB AND THE INTERNATIONAL LASER CLASS ASSOCIATION

Parental Consent for participation in the 2016 Laser Pacific Coast Championship and Medical and/or Dental Care of a Minor

I, the undersigned, am a parent having legal custody or other person having legal custody or guardian of the following minor: _____.

In consideration of said minor's participation in the 2016 Laser Pacific Coast Championships, I hereby authorize Cabrillo Beach Yacht Club ("CBYC") to consent to medical or dental care, or both, of said minor, including any X-ray examination, anesthetic, medical, dental or surgical diagnosis or treatment or hospital care under the general or special supervision and upon the advice of or to be rendered by a licensed physician or dentist. This authorization is given pursuant to California Family Code Section 6900 et. seq. I agree that this authorization shall remain in full force and effect for the duration of said minor's participation in the 2016 Laser Pacific Coast Championship and related activities and shall not be sooner revoked.

Non-Liability of CBYC and International Laser Class Association ("ILCA")

I agree that in no event will CBYC, ILCA, their parent companies, affiliates, or the partners, owners, directors, officers, employees, agents and committee persons of any of them have any liability whatsoever arising from or in connection with any medical or dental care rendered or to be rendered pursuant to the above Authorization.

I understand and agree to the terms of entry as detailed in the Notice of Race. I confirm that the following person is my nominated responsible adult who will accompany the above named minor for the duration of the championship.

Name of responsible adult: _____ Mobile phone number: _____

By signing below I certify that I have carefully read, understand and agree to the above.

_____ Signature of Parent or Guardian Date

_____ Print Name of Parent or Guardian

Address: _____ Day Phone: _____ Evening Phone: _____

Alternate Emergency Contact: _____ Phone: (____) _____

Return form to:

Cabrillo Beach YC, 211 W. 22nd Street, San Pedro California

310.519.1526