

Back to School Regatta at the Royal BVI Yacht Club

LIABILITY RELEASE AND EMERGENCY CONTACT FORM

Participant Name:	
Date of Birth (dd/mm/yy):/	Age:
Yacht Club:	Sail Number:
Coach Name:	
Emergency Contact Name:	
Relationship to Participant:	
Emergency Contact Number:	
Medical Conditions:	
IN CONSIDERATION OF	RELEASE FORM Please Read before Signing (Name), my child, being allowed to participate in any way in
the 2015 Dinghy Championships Regatta rela Program undersigned acknowledges, apprec	ted events and activities, the Royal British Virgin Islands Yacht Club and Youth ates, and agrees that:
disability and death, and while particular rule exist; and, I myself, my spouse, my child, and RELEASE AND HOLD HARMLESS The R officials, agents, employees, volunteers, othe lessors of premises used to conduct the event DEATH, or loss or damage to person or prop ARISING FROM THE NEGLIGENCE OF THAVE READ THIS RELEASE OF LIAITS TERMS, UNDERSTAND THAT	ies involved in these programs is significant, including the potential for permanent s, equipment, and personal discipline may reduce this risk, the risk of serious injury does on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY by all British Virgin Islands Yacht club and Youth Program, its directors, officers, a participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, erty incident to my child's involvement or participation in these programs, WHETHER HE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. BILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTANIAL HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT D VOLUNTARILY WITHOUT ANY INDUCEMENT.
Sailor Name:	IF UNDER 18: Parent/Guardian Name:
Sailor Signature:	Parent/Guardian Signature: