

**PARENT CONSENT, WAIVER OF LIABILITY  
AND MEDICAL RELEASE**  
**SOUTH EAST INTERSCHOLASTIC SAILING ASSOCIATION (SEISA),  
SEISA Singlehanded High School Championship - Cressy Qualifying Regatta  
September 18-19, 2021**

Student's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ School: \_\_\_\_\_ Grade \_\_\_\_\_

List all known allergies: \_\_\_\_\_

Medical Issues: \_\_\_\_\_ Current Medications: \_\_\_\_\_

Medical Insurance Information: Insured Name \_\_\_\_\_

Insurance Coverage:

Carrier: \_\_\_\_\_

Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_

As the parent/guardian of the above named student, I hereby acknowledge that the risk of injury, including serious debilitating injury, is involved in athletic participation. I recognize that ISSA, SEISA, Houston Yacht Club, and their representatives make efforts to reduce these risks, but further recognize that their efforts cannot and will not eliminate all risks. I am aware of the risks involved, and give my consent for the above named student to participate in all activities associated with the SEISA District Champs/Cressy Qualifying regatta.

I am aware that ISSA, SEISA and Houston Yacht Club do not carry medical insurance for students and that medical insurance coverage is provided by parent/guardian. Evidence of such coverage is provided above.

I further release and hold harmless ISSA, SEISA and Houston Yacht Club, their Officers, Directors, Trustees, agents, employees, volunteers, coaches and athletic trainers, and event vendors, from any and all liability arising from the above-named student's participation in the SEISA District Champs/Cressy Qualifying regatta.

**PERMISSION FOR MEDICAL CARE**

*I hereby grant permission to any appropriately qualified health care professional to give medically appropriate emergency care to my son/daughter/ward.*

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name (Legal Guardian if different than Parent)

\_\_\_\_\_  
Parent Date

\_\_\_\_\_  
Legal Guardian Signature Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Telephone Work/Cell

\_\_\_\_\_  
Telephone Work/Cell

**2021 SEISA District Single-Handed Championship Regatta**  
**Qualifier for the**  
**NATIONAL HIGH SCHOOL SINGLEHANDED CHAMPIONSHIP- CRESSY TROPHY**  
**Houston Yacht Club, Shoreacres, TX**

**ENTRY FORM – DUE BY September 15, 2021 - email to: Charles Barclay**  
**sailing@houstonyachtclub.com**

**Radial** \_\_\_\_\_ **Full Rig** \_\_\_\_\_ **Sail Number** \_\_\_\_\_

Sailor: \_\_\_\_\_ Best Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Student Email: \_\_\_\_\_

Parent Email: \_\_\_\_\_

School Data:

High School \_\_\_\_\_ Grade \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Note:** The high schools of all competitors must be registered with SEISA/ISSA and have dues paid for the 2020 - 2021 season **prior** to competing in this event.

Adult Chaperone: \_\_\_\_\_

Best Phone # during event: \_\_\_\_\_ email: \_\_\_\_\_

Additional Adult/Coach with sailor: \_\_\_\_\_

Best Phone # during event: \_\_\_\_\_ email: \_\_\_\_\_

**Signature of Parent/Guardian** \_\_\_\_\_ **Date** \_\_\_\_\_

**ENTRY FEE to Houston HOOD & SEISA Championship Regatta \$55, \$5 discount for US Sailing Members.**

1. Register at: [https://www.regattanetwork.com/event/23108#\\_registration](https://www.regattanetwork.com/event/23108#_registration)
2. Submit separate SEISA entry & waiver to Charles Barclay at:

**sailing@houstonyachtclub.com**

**QUESTIONS MAY BE DIRECTED TO: Principal Race Officer, Adolph Mares, Jr., at amares@embarqmail.com or the Event Chair, Beth Gibson, at sailingmom25@yahoo.com**