## Waiver and Release of Liability and Emergency Contact Information

For a boat to be eligible to participate in the event, this form must be completed and signed by the owner or skipper, helmsperson and all crew members.

Event: Kamikaze Regatta	Event Date:	Event Date: <u>December 5, 2021</u>		
Owner/Skipper Name:	B	Boat Name:		
Boat Type/Model:	Sail No.:	Total No. o	f People on Boat:	
WAIN	VER AND RELEASE O	F LIABILITY		
In consideration of being allowed to particip hereby waive any and all claims, actions, sui extent they are acting on behalf of PPYC, its sponsors and host locations of the Event, all officers, directors, employees and agents (all (including death) or property damage resulting them as a result of my participation in the Event and the content of the participation in the Event and the content of the participation in the Event and the content of the participation in the Event and the content of the participation in the Event and the parti	its and demands against Posts officers, directors, members of which are incorporated of the foregoing hereby and from the negligence or	ercy Priest Yacht Clu ers and committees, a by reference herein a referred to as "Release other acts or omission	b, Inc. ("PPYC") and to the and the organizing bodies, along with their respective ees") for any personal injury n by the Releasees or any of	
The undersigned acknowledge that participal personal injury or even death and the unders practicing for or participating in the Event.				
This release is executed in accordance with a	and shall be governed by t	he general laws of Te	ennessee.	
I HAVE CAREFULLY READ THIS WAIV CONTENTS.	ER AND RELEASE OF	LIABILITY AND FU	JLLY UNDERSTAND ITS	
Skipper/Owner:				
Printed Name:	Signature:		Date:	
In case of emergency contact: Name:		Phone:		
Crew Members (you are agreeing to the V	Vaiver and Release of Li	ability statement ab	ove):	
Printed Name:	Signature:		Date:	
In case of emergency contact: Name:		Phone:		
Printed Name:	Signature:		Date:	
In case of emergency contact: Name:		Phone:		
Printed Name:	Signature:		Date:	
In case of emergency contact: Name:		Phone:		
Printed Name:	Signature:		Date:	
In case of emergency contact: Name:		Phone:		
Printed Name:	Signature:		Date:	
In case of emergency contact: Name:		Phone:		
Printed Name:	Signature:		Date:	
In case of emergency contact: Name:		Phone:		