### CHARLOTTE HARBOR YOUTH SAILING ANNUAL LOVE BUG INVITATIONAL REGATTA DESCRIPTION AND PARTICIPATION AGREEMENT

### **General Information**

The Regatta you have entered is an exciting and demanding challenge. But you need to be aware of what will be involved and be willing to follow the current US Sailing Racing Rules of Sailing.

To qualify for participation, you must be between 10 and 17 years old and have successfully completed a Charlotte Harbor Youth Sailing Beginner, Intermediate or Advanced Summer Sailing Camp. Area and visiting youth that have completed these levels of instruction (are in possession of a US Sailing "Red Book" showing completion of all skills and signed by a US Sailing Certified Sailing Instructor or equivalent) are also eligible to register for the Love Bug Invitational Regatta. The attached student registration and medical and emergency information forms must be completed and signed by you or your parent/guardian and turned in to the Instructor prior to the start of the Regatta.

All participants will be required to provide a life jacket (vest type) which is US Coast Guard approved, the proper size for student's weight and build, and form fitting and comfortable, it be worn at all times during the Regatta. Put your name on it with waterproof ink. Proper footwear will also be worn at all times. Bring a change of clothes and a towel. As a qualification for registration, all students have completed the US Sailing training courses that include a swimming test and capsize drill. These skills will not be tested. On a windy day, splash from waves may also make a change of clothes at the end of the day desirable.

The fee for this Regatta is \$50.00.

#### Participant's Agreement

I understand that in entering Love Bug Invitational Regatta. I agree to obey all Organizing Authority and Host Organization rules as set forth by the Regatta Chairperson and Coaches, that I will use utmost care in the use of the boats and equipment that I will not engage in any horseplay or other disruptive behavior. I understand that failure to arrive promptly and abide by the rules may result in my Disqualification from the Regatta.

Applicant's Signature	Date
Sailing school representative affidavit (i	f participant did not complete a CHYS Camp).
I confirm that the registered youth has co	ompleted training equivalent to beginner skills
listed in the US Sailing Red Book at	Sailing School.
Signature:	Title:
Name of Sailing School:	

#### Parental/Guardian Release Form

On behalf of my minor child or ward, I assume full responsibility for any loss or damage that may come to any person, boat, sailboard, equipment, pier, float, or other property used in conjunction with this Regatta as a result of improper use, negligence, violation of the rules, and other acts of my child or ward. I assume the obligation for the expenses of repair and/or replacement of Charlotte Harbor Youth Sailing equipment that is attributable to my child's or ward's careless or irresponsible behavior.

I accept that the sport of sailing and the conduct of this course entail and are subject to certain inherent risks and assume all risks on land and on the water of the child's participation in this program.

I further agree to hold Charlotte Harbor Yacht Club, Charlotte Harbor Youth Sailing, the instructional program, the coaches, the instructors, US Sailing, and their representatives harmless for personal injuries and/or property damage. I agree to indemnify and hold harmless Charlotte Harbor Youth Sailing Inc., Charlotte Harbor Yacht Club, their officers, employees, race committees, race participants, guests, agents, or anyone else associated with the Love Bug Invitational Regatta from any and all claims or lawsuits in which the minor child may bring. This indemnification and hold harmless agreement includes, but is not limited to: all damages, settlements, costs, and all attorneys' fees incurred in defense of such claims.

I also attest that, to the best of my knowledge, the child is free and unencumbered from any physical or mental impairment and is free of any contagious or infectious disease that might interfere with his or her health, the health of others in the program or his or her safety during the course of the program.

I authorize the OA and/or the HO to obtain medical treatment in the event of any accident or injury if I cannot be reached.

I understand the contents of the Participation Agreement and will endeavor to ensure that my child or ward adheres to the Regatta, OA & HO rules. If there are problems with my child's or ward's participation in the Regatta I agree to participate in a parent-Regatta Chairperson conference if requested.

I have read and attest that I agree with the above and all the terms within this document, and further
I attest that I have the legal authority, both for myself and the participating child, to execute this
document.

Signature:	_ Date:	/	/
Applicant's Parental/Guardian (if student is a minor).		<u> </u>	

YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM AND CHARLOTTE HARBOR YOUTH SAIING INC. HAS THE RIGHT TO REFUSE TO LET YOUR CHILD OR WARD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

# CHYS SATURDAY ADVENTURE/ADVANCED YOUTH MEMBERSHIP REGISTRATION \*

## Membership Information:

Applicant (applicant to complete):			
Name:		Birthdate:/	/Sex: F 🛮 / M 🗈
Ht: feet inches	Weight:	lbs.	
Address			
No.	Street		
City:	Mobil Ph	State:/ none: ()/	Zip:
E-Mail Address:		@	
Parent/Guardian (parent/guardian to con Father's/Guardian's name: Home Phone: ( ) / E-Mail Address:	Mobil Ph	none: ( ) /	
Mother's/Guardian's name: Home Phone: ( ) / E-Mail Address:	Mobil Ph	none: ( ) /	
Emergency contact name: Phone: ( ) / E-Mail Ad	dress:	Rel	ationship:
Signature Applicant:		Date:	//

\* Membership in the CHYS Saturday Program is required for Love Bug Regatta participants that will be sailing CHYS boats. The \$50 Regatta Entry Fee covers the CHYS Membership for 2022-2023 school year. Subsequent Saturday Advanced Sailing Sessions cost \$25 each.

# **Charlotte Harbor Youth Sailing Photo Release**

I,		grant	permis	sion to
Charlotte Harbor Youth Sailing Inc. (CHY	S) and organizations	s they ar	e affiliat	ed with
to use both mine and my child's likeness,	photographic image	e(s) and	our nar	ne(s) in
it's educational, promotional and public	ity communications	and m	aterials	free of
charge. I do not limit this use to conclude	at a specific time or	date.		
YES NO				
Student Name:				
Student Signature				
If an Adult:	Date:	/	_/	
Print Name:				
Signature of				
Parent / Guardian:	Date: _	/	_/	
Print Name:				
Street	City	State	7	Zip code
Phone number: ()				
Email Address:	<b>@</b>			

<sup>\*</sup>Photo Release not applicable to scholarship students referred by GAL, CNSWFL, and FSWCHS.