

Competitor's Agreement

Competitor's Agreement: I accept US Sailing's invitation to sail in the 2012 U.S. Youth Sailing Championships. By accepting this invitation, I agree to comply with the restriction on drinking and the use of illegal drugs for the entire event. I also agree to share in the responsibility for making the event run smoothly both on and off the water. In particular, I will respect that others are also taking this championship seriously, I will respect property that is not mine, I will respect the efforts of the event hosts, and I will respect and show appreciation for the generosity of my hosts.

Print competitor's name clearly	Competitor's Signature	date
restriction on the use of alcoh I/We fully understand that offe and if practical sent home. I/W	ol and illegal drugs during the 20 enders of the restriction will imme We understand that I/We are resp ge to property, including charten	petitor's agreement above and the 12 U.S. Youth Sailing Championships. ediately be removed from the racing ponsible for the behavior of my/our red boats, caused by him/her, and
Print parent's name	Parent's Signature (even if 18 or o	older)/date

Mail these forms **postmarked** *no later than May*31 2012

Columbia Gorge Racing Association Attn: US Youth Championships PO Box 19175 Portland, OR 97280



HOUSING FORM

Each sailor must complete and sign separate copies of this form. Please fill it out completely - incomplete forms will not be accepted.

Competitor's name (please print)	_
Home Address	Age
City/State/Zip	
Email:	
Parent's Email:Parent's Daytime Phone (
Parent's Home Phone () Parent's Emergency Number ()	
ROOMMATE: Is there any competitor (of the same gender) with whom you would like to s No guarantees!	share a room?
Name(s):	
Sailors must bring their own sleeping bag, pillow, towel and soap for showers.	



DRIVER'S RELEASE FORM

Only those sailors who have submitted this form in advance will be permitted to drive to and from Camp Angelos on the first and last day of the championship. All drivers will be asked to surrender their keys on the first evening.

I	give permission for
(parent/guardian name)	(name of competitor)
to either drive themselves or be driven by $_$	during the 2012 U.S.
Youth Sailing Championship from August 14 and sponsors of all liability and responsibility	(name) through August 18. I release CGRA, US Sailing, all volunteers, during the Championship.
Parent/guardian name (please print):	
Address:	
Phone numbers: (w)	(h)
Relationship to competitor:	
Parent/guardian signature:	Date:
Please complete the following information al	bout the vehicle(s) if you are bringing a car and/or trailer.
Vehicle Make, Model and Color	
License Plate (vehicle) State and Number	
License Plate (trailer if any) State and Numbe	er

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RELEASE OF LIABILITY

In consideration of the undersigned's participation in the U.S Youth Sailing Championship ("the Regatta") sponsored by US Sailing, Sperry TopSider, Gill North America, Zim Sailing, Switlik Survival Products and local sponsors (collectively, the "Sponsors") and hosted by the Columbia Gorge Racing Association (the "Host") from 14-18 August 2012 the undersigned participant ("Participant"), and if such Participant is a minor, the Participant's parent or legal guardian by countersigning below, on behalf of themselves and their respective heirs, executors, administrators, personal representatives and next of kin (collectively with Participant, "Releasors"), hereby forever waive, release and discharge each of the Sponsors, the Host and their respective parents, subsidiaries, affiliates, owners, members, managers, employees, officers, directors, agents, representatives, successors and assigns (each a "Released Party") from any and all claims, demands, damages, judgments, executions, rights of action or causes of action, present or future, whether the same be known, anticipated or unanticipated, which a Releasor may have, or claim to have, against any Released Party resulting from death, personal injury, property damage or other loss Releasor may sustain as a result of participating in the Regatta or other activities related thereto.

THIS RELEASE IS INTENDED TO DISCHARGE EACH RELEASED PARTY FROM ANY AND ALL LIABILITY ARISING OUT OF OR CONNECTED IN ANY WAY WITH RELEASOR'S PARTICIPATION IN THE REGATTA EVEN IF THAT LIABILITY ARISES OUT OF NEGLIGENCE OR CARELESSNESS ON THE PART OF ANY RELEASED PARTY.

Releasors hereby acknowledge that serious accidents occasionally occur during sailing activities and that mortal or serious personal injuries and/or property damage or other loss may result from participation in the Regatta. Releasors knowingly assume all risks of participation in the Regatta, including all risk of personal injury and loss of or damage to the Releasors or their property, including further injury sustained as the result of the efforts of third parties who come to the aid of Releasor(s) if injured as a result of participation in the Regatta, and release all other persons and entities mentioned above who might otherwise be liable to Releasors. Releasors agree to abide by all rules of the Sponsors and the Host in connection with participation in the Regatta and understand that the failure to observe and obey such rules may result in instant revocation of Releaor's(s') right to participate in the Regatta.

Signature of Regatta Participant:	
	Print Name:
The undersigned parent and/or racting in such capacity and agree all liability, loss, cost, claim or d	OR MINORS (UNDER 18 YEARS OF AGE) natural or legal guardian does hereby represent that he/she is, in fact, es to release each and all of the Released Parties referred to above from lamage whatsoever which may be imposed upon said Party(ies) because apacity to so act and release said Party(ies) on behalf of all Releasors as
Signature of Parent/Legal Guardi	an:
Print Name:	Date:



DEPICTION RELEASE

The signed consent form MUST be on file in order to complete registration. One must be on file for each sailor.

U.S Youth Sailing Championship ("the Regatta") sponsored by US Sailing, Sperry TopSider, Gill North America, Zim Sailing, Switlik Survival Products and local sponsors (collectively, the "Sponsors") and hosted by the Columbia Gorge Racing Association (the "Host") from 14 -18 August 2012, the undersigned participant ("Participant") and if such Participant is a minor, the Participant's parent or legal guardian by countersigning below ("Parent/ Guardian"), hereby grant to the Sponsors and the Host, perpetually and irrevocably, the unconditional and exclusive right, title and interest throughout the world to use, simulate and portray Participant's name, likeness, voice, personality, personal identification, and personal experiences, incidents, situations and events, whether visual and/or audio, including without limitation photographs, videotape, film and other recordings, electronic or optical-based media, or any other form or medium whatsoever, whether now or hereafter existing, and of every kind and character (collectively "The Images"), which may be taken or taken of Participant while participating in any aspect of the Regatta. Participant and Parent/Guardian understand and agree that one or more of the Sponsors and/or Host will be the owner(s) of any and all right, title and interest in and to the Images, in any derivative works, and in any merchandising, advertising, promotional and publicity rights and materials related thereto in all media of every nature whatsoever, whether now known or hereafter devised. Participant reserves no rights with respect to such uses. Participant and Parent/Guardian acknowledge the Sponsors' and the Host's right, title and interest in and advertisement, promotion, distribution and sale of products or events directly or indirectly related to the Regatta and/or yacht racing. Participant and Parent/Guardian agree that the Sponsors and the Host shall have unlimited right to vary, change, alter, modify, add to, and delete from any depictions of Participant in the Images and to rearrange and/or transpose such depictions as each may determine. Participant and Parent/ Guardian hereby waive any right to inspect, review or approve the Images and their use by the Sponsors and the Host and acknowledge that they are to receive no payment with respect to any matter referred to herein and that any and all of the rights granted herein are freely assignable by Sponsors and/or Host.

PARTICIPANT AND PARENT/GUARDIAN, ON BEHALF OF THEMSELVES AND THEIR RESPECTIVE HEIRS, EXECUTORS, ADMINISTRATORS, PERSONAL REPRESENTATIVES AND NEXT OF KIN (COLLECTIVELY, "RELEASERS"), HEREBY FOREVER WAIVE, RELEASE AND DISCHARGE EACH OF THE SPONSORS, THE HOST AND THEIR RESPECTIVE PARENTS, SUBSIDIARIES, AFFILIATES, OWNERS, MEMBERS, MANAGERS. EMPLOYEES, OFFICERS, DIRECTORS, AGENTS, SUCCESSORS, ASSIGNS AND REPRESENTATIVES (EACH A "RELEASED PARTY") FROM ANY AND ALL CLAIMS, DEMANDS, OR CAUSES OF ACTION THAT RELEASORS MIGHT NOW OR HEREAFTER HAVE FOR LIBEL, DEFAMATION, INVASION OF PRIVACY, RIGHT OF PUBLICITY, INFRINGEMENT OF COPYRIGHT OR TRADEMARK, OR VIOLATION OF ANY OTHER RIGHT ARISING OUT OF OR RELATING TO ANY UTILIZATION OF THE RIGHTS GRANTED UNDER THIS DEPICTION RELEASE.

TAKTICH AIVI (Signature).	
NAME (print)	DATE
PARENT OR GUARDIANS FOR MINORS (UNDER 18 Y	EARS OF AGE)
The undersigned parent and/or natural or legal guardian does he capacity and agrees to release each and all of the Released P	
claim or damage whatsoever which may be imposed upon said	d Party(ies) because of any defect in or lack of such
capacity to so act and release said Party(ies) on behalf of all Rel	leasors as specified herein.
PARENT OR GUARDIAN (Signature):	
PARENT/GUARDIAN NAME (Printed):	DATE:

PARTICIPANT (Signature)



MEDICAL CONSENT FORM

Each participant must complete and sign a copy of this form. Please fill it out completely. Incomplete forms will not be accepted. *Mail this form postmarked no later than May 31*

NAME	OF PARTICIPANT:			
NAME	OF PARENT OR GUARDIAN	V (if under 18)		
named a about th activity	above as the "Participant") or in the premises of the Columbia	the event of illness of my Gorge Racing Association aspices of the Columbia (yself, my spouse or on or Camp Angelo Gorge Racing Asso	pecifically including my child if any child of mine while in, on or os or while participating in any ociation or Camp Angelos under
1.	I hereby voluntarily consent to medical care, attention and physician or physicians may of	treatment by any hospit	al, physician or pl	
2.	I authorize the General Ma Columbia Gorge Racing Asso treatment.			
3.	I agree to pay all costs of suc and from any and all liability the United States Sailing Asso	for such cost the Columbi	a Gorge Racing Ass	sociation or Camp Angelos,
procedure the State Department hospital in the e- undersign	re rendered under the general or es of Oregon or Washington of nent of Health. It is understood care being required but is given xercise of his best judgment n ened prior to rendering treatment and cannot be reached.	specific supervision of any or of any hospital holding that this authorization is gi to provide authority and pon any deem advisable. It is	member of the med- g a current operating ven in advance of a wer to render care we understood that ef	ic, medical or surgical diagnosis or ical staff or of a dentist licensed by ng certificate issued by the State ny specific diagnosis, treatment or which the aforementioned physician fort shall be made to contact the atment will not be withheld if the
				.
	Guardian Signature (if under 18 E OF EMERGENCY CALL:):		Date:
	NAME	RELATIONS	SHIP	PHONE NUMBER
PHYSIC	CIAN WHO CONDUCTED YO	OUR MOST RECENT PH	YSICAL EXAMIN	ATION:
	NAME	PHONE NUM	IBER	DATE OF LAST EXAM
	HEALTH INSURAN	CE CARRIER	Γ	NSURANCE ID NUMBER
	PLEASE FIL	L OUT THE REVERSE	SIDE	



MEDICAL AND EMERGENCY INFORMATION

Telephone	(home)	(Emergency cell) Date of Rirth:	
		(Einergency cen) Date of Bitti.	
THE PARTICIPANT AND/ QUESTIONS AS ACCURATE		MUST RESPOND TO THE FOLLOWING AS POSSIBLE:	
Please check those that apply: (Pr	rovide necessary details below	<u>')</u>	
CHRONIC AII	LMENTS:	ALLERGIES:	
ASTHMA, OR OTHER RESPI	RATORY PROBLEMS	MEDICATION (please list below)	
DIABETES OR HYPOGLYCE	MIA	LATEX	
HEMOPHILIA, OR OTHER BI	LEEDING PROBLEMS	BEE STINGS/INSECT BITES	
CIRCULATORY OR HEART I	PROBLEMS	IF YES, DO YOU CARRY AN EPIPEN?	
EPILEPSY/ SEIZURE		FOODS	
OTHER		OTHER	

PLEASE MAKE SURE YOU HAVE FILLED IN ALL THE NECESSARY INFORMATION If any of the above mentioned information changes before or during the event, please submit in writing all pertinent information to the regatta chairperson.

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