



**U.S. YOUTH
CHAMPIONSHIP**

**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.

Alec Tayler *Alec Tayler* 5/18/12
Print competitor's name clearly *Competitor's Signature* *date*

Competitor's Parent(s) Agreement: I/We have read the competitor's agreement above and the restriction on the use of alcohol and illegal drugs during the 2012 U.S. Youth Sailing Championships. I/We fully understand that offenders of the restriction will immediately be removed from the racing and if practical sent home. I/We understand that I/We are responsible for the behavior of my/our child and liable for any damage to property, including chartered boats, caused by him/her, and damage to CGRA, Camp Angelos and Marine Park property.

Amy Tayler *Amy Tayler* 5/18/12
Print parent's name *Parent's Signature (even if 18 or 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*



U.S. YOUTH
CHAMPIONSHIP

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) Alec Tayler M or F

Home Address PO BOX 1390 Age 17

City/State/Zip St. Thomas VI 00804

Email: alecusvi@gmail.com

Parent's Email: amyusvi@mac.com Parent's Daytime Phone (352) 874 1108

Parent's Home Phone (~~#~~) SAME Parent's Emergency Number 352 255 3515
() _____

ROOMMATE: Is there any competitor (of the same gender) with whom you would like to share a room?
No guarantees!

Name(s): Kyle Brego

Sailors must bring their own sleeping bag, pillow, towel and soap for showers.



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DRIVER'S RELEASE FORM

N/A

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.
(name)

Youth Sailing Championship from August 14 through August 18. I release CGRA, US Sailing, all volunteers, and sponsors of all liability and responsibility during the Championship.

Parent/guardian name (please print): _____
Address: _____
City/State/Zip: _____
Phone numbers: (w) _____ (h) _____
Relationship to competitor: _____
Parent/guardian signature: _____ Date: _____

Please complete the following information about 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 Number _____

Mail these forms postmarked no later than May 31 2012

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




U.S. YOUTH CHAMPIONSHIP

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.

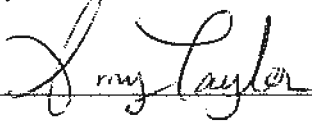
THIS RELEASE IS INTENDED TO DISCHARGE EACH RELEASED PARTY FROM ANY AND ALL LIABILITY ARISING OUT OF OR CONNECTED IN ANY WAY WITH RELEASOR'S PARTICIPATION IN THE REGATTA EVEN IF THAT LIABILITY ARISES OUT OF NEGLIGENCE OR CARELESSNESS ON THE PART OF ANY RELEASED PARTY.

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 Releasor's(s') right to participate in the Regatta.

Signature of Regatta Participant: 
Print Name: Alec Tayler

PARENT OR GUARDIANS FOR MINORS (UNDER 18 YEARS OF AGE)

The undersigned parent and/or natural or legal guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to release each and all of the Released Parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said Party(ies) because of any defect in or lack of such capacity to so act and release said Party(ies) on behalf of all Releasors as specified herein.

Signature of Parent/Legal Guardian: 
Print Name: Amy Tayler Date: 5/19/12



U.S. YOUTH CHAMPIONSHIP

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.

PARTICIPANT (Signature): *Alec Tayler*

NAME (print) Alec Tayler

DATE 5/19/12

PARENT OR GUARDIANS FOR MINORS (UNDER 18 YEARS OF AGE)

The undersigned parent and/or natural or legal guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to release each and all of the Released Parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said Party(ies) because of any defect in or lack of such capacity to so act and release said Party(ies) on behalf of all Releasers as specified herein.

PARENT OR GUARDIAN (Signature): *Amy Tayler*
PARENT/GUARDIAN NAME (Printed): Amy Tayler

5/19/12
DATE:



U.S. YOUTH CHAMPIONSHIP

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: Alec Tayler *Legal 1st Name Alexander*

NAME OF PARENT OR GUARDIAN (if under 18): Amy Tayler

In the event of accident or injury to myself, my spouse or any child of mine (specifically including my child if named above as the "Participant") or in the event of illness of myself, my spouse or any child of mine while in, on or about the premises of the Columbia Gorge Racing Association or Camp Angelos or while participating in any activity sponsored by or under the auspices of the Columbia Gorge Racing Association or Camp Angelos under circumstances where I am physically unable to consent or am not present:

1. I hereby voluntarily consent to the furnishing to myself, my spouse or any of my said children of such medical care, attention and treatment by any hospital, physician or physicians as such hospital, physician or physicians may deem necessary or advisable.
2. I authorize the General Manager, Assistant General Manager or any officer or member of the Columbia Gorge Racing Association or Camp Angelos to consent to such medical care, attention or treatment.
3. I agree to pay all costs of such medical care, attention or treatment and to hold free and harmless of and from any and all liability for such cost the Columbia Gorge Racing Association or Camp Angelos, the United States Sailing Association and the officers and members of each.

I, the undersigned, do hereby authorize and consent to any x-ray examination, anesthetic, medical or surgical diagnosis or procedure rendered under the general or specific supervision of any member of the medical staff or of a dentist licensed by the States of Oregon or Washington or of any hospital holding a current operating certificate issued by the State Department of Health. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power to render care which the aforementioned physician in the exercise of his best judgment may deem advisable. It is understood that effort shall be made to contact the undersigned prior to rendering treatment to the patient, but that any of the above treatment will not be withheld if the undersigned cannot be reached.

Signature: *[Signature]*

Parent/Guardian Signature (if under 18): *[Signature]* Date: 5/19/12

NAME	RELATIONSHIP	PHONE NUMBER
Amy Tayler	MOTHER	352 874 1108
Hal Tayler	FATHER	352 255-3515

PHYSICIAN WHO CONDUCTED YOUR MOST RECENT PHYSICAL EXAMINATION:

NAME	PHONE NUMBER	DATE OF LAST EXAM
Dr. James Clayton	340 775 2303	Sep 11

HEALTH INSURANCE CARRIER	INSURANCE ID NUMBER
GIGNA	3215952 ID# U1416425703

PLEASE FILL OUT THE REVERSE SIDE



U.S. YOUTH CHAMPIONSHIP

MEDICAL AND EMERGENCY INFORMATION

Competitor's name: Alexander Taylor Male [checked] or Female
Address: PO Box 1340
City/State/Zip: St. Thomas VI 00804
Telephone 352 874 1108 (home) SAME (Emergency cell) Date of Birth: 2/9/1995

THE PARTICIPANT AND/OR THEIR PARENT(S) MUST RESPOND TO THE FOLLOWING QUESTIONS AS ACCURATELY AND COMPLETELY AS POSSIBLE:

Please check those that apply: (Provide necessary details below)

Table with 2 columns: CHRONIC AILMENTS and ALLERGIES. Rows include Asthma, Diabetes, Hemophilia, Circulatory, Epilepsy, and Other ailments; and Medication, Latex, Bee stings, EpiPen, Foods, and Other allergies.

DATE OF LAST TETANUS/ DIPHTHERIA/ TOXOID SHOT: SEP 06

CURRENT MEDICATIONS AND DOSAGE IF ANY: NONE

DETAILS:

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.

Mail these forms postmarked no later than May 31 2012

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

mycigna.com

Connecticut General Life Insurance Co.
Coverage Effective Date: 04/01/2012
Group: 3215952
Issuer (800440)
ID: U14164257 03
Name: Alexander Tayler

Open Access Plus
No Referral Required
PCP Visit \$35
Specialist \$40
Hospital ER \$200
Urgent Care \$100
Rx \$15/\$40/\$75/20%
Network Coinsurance:
In 80%/20%
Out 50%/50%

NXP Management
Rx BIN 600428 Rx PCN 02150000

MultiPlan
Network Savings Program

NACWEP0

WWW.CIGNA.COM

You may be asked to present this card when you receive care. The card does not guarantee coverage. You must comply with all terms and conditions of the plan. Willful misuse of this card is considered fraud.

INPATIENT ADMISSION AND OUTPATIENT PROCEDURES:

Your Network provider must call the toll-free number listed below to pre-certify the above services. Refer to your plan documents for your pre-certification requirements. Failure to do so may affect benefits. In an emergency, seek care immediately, then call your primary care doctor as soon as possible for further assistance and directions on follow-up care within 48 hours.

Send Claims to:

P.O. Box 182223, Chattanooga, TN 37422-7223

Customer Service: 1-800-244-6224

We encourage you to use a PCP as a valuable resource and personal health advocate

AWAY FROM HOME CARE