

**Royal Victoria Yacht Club**  
**Laser South Coast Grand Prix**  
**26<sup>th</sup> April 2008**  
**Entry Form**  
(Entries will be accepted on the day)

Title:	First Name:	Last Name:
Address:		
Postcode:		
Tel. No.:		email:

I declare I am a current member of the UKLA. My membership No. is \_\_\_\_\_

My Sail Number for the event is: \_\_\_\_\_ My Club is \_\_\_\_\_

Please enter me in the following category: (Circle relevant category)

STANDARD                      RADIAL                      4.7

Entries will not be accepted unless accompanied by the Fee of £10, (cheques payable to RVYC).

**LIABILITY**

- I) By signing this form the Participant accepts that he / she is responsible for themselves and their boat, whether ashore or afloat.
- II) Nothing done by the Organisers (I.e. The club, the race management team, the patrol craft and anyone helping to run the event) will relieve the participants of their responsibilities.
- III) By launching or putting out to sea participants imply the suitability of their boat and the competence of the helm for the expected or forecast conditions.
- IV) The provision of patrol boats does not relieve the participants of their responsibilities.

I agree to be bound by the Notice of Race, the Sailing Instructions, ISAF Rules of Sailing 2005-2008 and the ILCA rules. I am the owner / person in charge / competitor / manager of the above boat and I confirm that Third Party Full Risks Insurance cover of a minimum of £2,000,000 (Two Million) is held for the duration of the event.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**PARENTAL CONSENT:**

Under law, this helm is my dependent and I accept the above conditions. I confirm that my dependent is competent to take part in this event and that I am responsible for the dependent throughout the event. During the time my dependent is afloat I will be in or around the host club or I will inform the Race Officer in writing who is acting 'in loco parentis' during my absence.

Name (Print) \_\_\_\_\_ Relationship \_\_\_\_\_

Tel No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_