

2017 Cappelli Race



Racing Application

Name: _____ RIYC Member # _____

Phone: (H) _____ (Cell) _____

Email: _____

Name of boat: _____ Sail # _____

Type of boat: _____ Size: _____

PHRF Cruising: _____

Where do you keep your boat? _____

Fees: There is no fee for this race.

Mail to:

RI Yacht Club
1 Ocean Avenue
Cranston RI 02905
Attention: Race Chairman

NOTE: ALL BOAT OWNERS MUST SIGN THE WAIVER OF LIABILITY

(SEE ON BACK). ALL OWNERS SHOULD READ AND BE FAMILIAR WITH THE RACING RULES OF SAILING AND THE RACE INSTRUCTIONS.

OVER



**THIS AGREEMENT CONTAINS A RELEASE AND WAIVER
READ FIRST
RELEASE, WAIVER AND COVENANT NOT TO SUE.**

The undersigned acknowledges that in consideration of the efforts of the host organization(s), for being allowed to participate in this regatta/races and the acceptance of this application to race, HE/SHE DOES HEREBY WAIVE AND RELEASE ANY AND ALL CLAIMS THE UNDERSIGNED MAY HAVE AGAINST THE HOST(S), ITS OFFICERS, DIRECTORS, OR TRUSTEES AND ITS COMMITTEE MEMBERS, MEASURERS, JUDGES, AGENTS AND REPRESENTATIVES ARISING OUT OF THE ACTIVITIES REQUIRED FOR THE RACES ON THE WATER, AND DOES FURTHER COVENANT AND AGREE NOT TO SUE OR TO BRING ANY CLAIM OR CLAIMS OF ANY NATURE WHATSOEVER AGAINST THE HOST ORGANIZATION(S) OR ANY OF THE PERSONS AND OFFICES NAMED, OR UNNAMED, ABOVE WHO MAY BE ACTING ON THE HOST(S)' OR ITS/THEIR BEHALF.

SIGNED: _____ DATE _____