

RS Feva International Sailing Clinic 2019 ENTRY FORM

Helm Details

Helm's Name : _____
Gender: male female
D.O.B. (yyyy.mm.dd.): _____
Club: _____
Nation: _____
Email: _____

Crew Details

Crew's Name: _____
Gender: male female
D.O.B. (yyyy.mm.dd.): _____
Club: _____
Nation: _____
Email: _____

Parent / Guardian Details

Name: _____
Phone: _____
Email: _____

Boat details

Sail number#: _____
Nation : _____

Coach details

Name: _____
Coach boat#: _____
Phone: _____
Email: _____

Date : _____

contact:
address
phone
e-mail
web

  
Budaörsi str 46, Budapest H-1117
+36 20 973 1633
office@rs-sailing.hu
www.rs-sailing.hu

Signature

I agree to be governed by the Racing Rules of Sailing. I have read and understood the championship rules as stated in the RS Feva Eurocup Hungary 2019 Notice of Race and Sailing Instructions, and agree to follow them.

Agreement

I, the parent/ guardian have legal custody of the minor. I hereby authorise the responsible adult to act as my nomanited person at the championship. I agree that this authorisation shall remain in effect for the duration of the minor's participation in the championship and related activities and shall not be revoked before the end of the championship.

Non-Liability of the club and the class

I agree that in no event will the club or the class, their parent companies, affiliates, or the partners, owners, directors, officers, employees, agents and committee persons have any liability whatsoever arising from or in connection with andy action or non-action of the responsible adult. I, the parent/ guardian understand and agree to the terms of entry as detailed in the Notice of Race and confirm that the responsible adult will accompany the minor for the duration of the championship. By signing I certify that I have carefully read, understand and agree to the above agreement and non-liability statement.

Date : _____

Signature

contact:
address
phone
e-mail
web



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