

ENTRY FORM FOR AJAX NATIONAL CHAMPIONSHIPS 2019

Organising Authority – Royal Harwich Yacht Club

Venue – Dovercourt Bay – Boats may be based at Shotley Marina

NAME OF BOAT	
SAIL NUMBER	
HULL COLOUR	
CLUB	
OWNER'S NAME	
CREW NAME	
CREW NAME	
E-MAIL ADDRESS	
TELEPHONE NUMBER LANDLINE MOBILE	
NAME, ADDRESS AND CONTACT TELEPHONE OF PERSON-IN-CHARGE IF <u>NOT</u> THE OWNER	
CONTACT NAME AND TELEPHONE NUMBER IN CASE OF EMERGENCY DURING THE CHAMPIONSHIPS	
In the interests of your safety do you or your crew have any medical conditions or physical or mental impairments that the Organiser needs to be aware of that may affect you during the event?	Yes / No If Yes please complete the Medical Information section

Entry fee prior to 16th September 2019	£50	£
Late entry fee – received after 15 th September	£60	£
<i>Association membership fee (if not already paid)</i>	£12	£
TOTAL AMOUNT		£

RISK STATEMENT

It must be recognised that sailing is by its nature an unpredictable sport and therefore inherently involves an element of risk. By taking part in the Event, you agree and acknowledge that:

- i. You are aware of the inherent element of risk involved in the sport and you accept responsibility for exposing yourself to such inherent risk whilst taking part in the Event;
- ii. You will comply at all times with the instructions of the Event Organiser, the Race Officer, and Safety Boats;
- iii. You accept responsibility for any injury, damage or loss to the extent caused by your own negligence;
- iv. You will not participate in the Event if your ability to participate is impaired by alcohol, drugs or if you are otherwise unfit to participate;
- v. You will inform the Event Co-ordinator if there have been any changes to the information provided on this form at the time of the Event.
- vi. The provision of assistance by the Organiser is limited to such assistance, as can be practically provided in the circumstances.

2. NOTICE OF RACE, SAILING INSTRUCTIONS

You confirm that you have read and understood the Notice of Race and Sailing Instructions and will comply with them.

3. CANCELLATION

You understand that the Event Co-ordinator may cancel, abandon or postpone the Event at any stage in the event of bad weather, or otherwise.

4. MISCONDUCT

You understand that the Event Co-ordinator may exclude anyone from a particular session and evict anyone from the premises who refuses to comply with these Registration Terms or who misconducts themselves in any way or who causes damage or annoyance to other persons.

5. DATA PROTECTION

The Organiser has a Data Privacy Policy which can be provided by the Club Manager.

Your data will be stored and used in accordance with that policy.

The information you provide in his form will be used to facilitate your participation in the Event and to contact you. The Organiser would also like to include your contact details on a mailing list in order to make you aware of membership opportunities and future events.

If you would like to be included on this mailing list please tick here.

If you wish to withdraw your consent at any time, please contact the Club Manager.

6. PHOTOGRAPHY

The Organiser may arrange for photographs or videos to be taken at the Event and published on the Event or Organisers website or social media channels to promote the Event or Organiser.

If you, and where applicable your crew, consent to the use of images of you being used for this purpose, please tick here.

PARENTAL/GUARDIAN CONSENT (if children under 18)

If you consent to the use of your child's image being used for the purposes above please tick here.

By consenting to the use of your child's image being used, you confirm that that your child is not under a court order which may prevent their image from being published.

WITHDRAWAL OF CONSENT

If you/ the individuals listed above later wish to withdraw consent, please contact the Club Manager. Please be aware that if you later decide to withdraw your consent it will not be possible to remove your image from any printed material in circulation, or until the next edition or print of the item containing your image is released.

SAFETY CHECK LIST FOR AJAX CLASS

- One anchor weighing not less than 4.5kg and in addition a kedge may be carried. Attached to the anchor shall be 2 metres of chain, which shall be 6mm galvanised, calibrated chain.
- Not less than 36m of anchor or kedge rope of not less than 8mm diameter and a spare warp.
- 2 x paddles or 1x oar
- Bilge pump
- Sharp knife
- Two substantial buckets, each of a minimum 5 litres
- A compass
- Adequate life- saving gear including life jackets or buoyancy aids for all persons on board.

I agree to be bound by the Racing Rules of Sailing and all other rules that govern this event. In particular, I confirm that I have read the Notice of Race and accept its provisions and agree that my boat will conform to the requirements set out in the Notice of Race throughout the event.

I confirm that I have read and fully understand the above Registration Terms and agree to comply with them.

Signed _____ Date _____

PARENTAL/GUARDIAN AGREEMENT (if helm or crew are children under 18)

Name of parent/guardian completing this form Relationship to participant

Supervision (tick one box)

I will be responsible for my child throughout the event. I will be available at the event venue

OR

I appoint the person named below, who has agreed to act in loco parentis. He/she will be responsible for my dependant throughout the event. He/she will be available at the event venue

Name of person appointed in loco parentis Mobile number

I agree that may take part in the Event. I confirm that I have read through the above conditions with him/her and that she/he understands and agrees with them. I also confirm that he/she takes part in the Event with my full agreement that that the particulars given above are correct and complete in all respects.

Signed Parent/Guardian Date

MEDICAL INFORMATION AND IMPAIRMENTS

Please ensure each member in your group provides details of any medical conditions or physical or mental impairments that the Organiser needs to be aware of that may affect their ability to take part in the Event on this form (continue on a separate sheet if necessary).

SPECIAL CATEGORY DATA: I confirm that I have given the Organiser the medical information listed above (if any) for the purposes of my participation in the Event. I understand that this information will only be used for that purpose and will be retained for as long as necessary to comply with the Organisers legal obligations.

I agree / I do not agree (Please delete as appropriate)

Signed

(The Participant(s) Date