



## RN&SYC JUNE REGATTA 2025

Saturday 14<sup>th</sup> June, Sunday 15<sup>th</sup> June 2025

The Royal Norfolk & Suffolk Yacht Club

Royal Plain, Lowestoft NR33 0AQ, Tel: 01502 566726 Email: admin@rnsyc.org.uk

### RACE ENTRY FORM

To be signed and handed in prior to racing.

**Briefing Saturday 9.30am**

<b>NAME</b>	
ADDRESS (including Postcode)	
Email Address	Telephone No
Car Registration Number:	Club
<b>YACHT SAIL NO &amp; NAME</b>	Class
Hull Colour	VHF on Board?
Helm ( First & Surname )	Age if under 18
<b>CREW</b> ( First & Surname)	Age if under 18
<b>CREW</b> ( First & Surname)	Age if under 18
<b>REGATTA ENTRY FEE</b> <u>Keel Boats:</u> Regatta (All races) Members £45 Others £50  <u>Dinghies PY1104 or faster:</u> Members £15.00 Others £20	<b>Amount Submitted</b>  TOTAL £
<b>COMMODORE'S RECEPTION AND SUPPER</b> £ 25 PER PERSON	Number Total £
<b>CONDITIONS OF ENTRY</b> Upon entering it shall be accepted that all competitors will abide by the ISAF Racing Rules of Sailing and the 2025 RN&SYC Sailing Instructions. Entry must be paid prior to racing.	
<b>DECLARATION (See Over)</b> I hereby declare the above yacht has valid insurance and, in particular, is insured against third party claims of at least three million pounds sterling (£3,000,000). I accept the Conditions of Entry. SIGNED _____ DATE _____	

Date Payment Received	Amount	Cash	Cheque	Bank card	Clubcard	Signed
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In the event of an accident or emergency to you or your crew, the first responders will require details of any medical condition you may suffer from and any medication you may be taking. Please, therefore, complete the sections below as they apply to you and your crew.

	HELM	CREW 1	CREW 2
Please give any medical conditions or physical or mental conditions that may affect medical treatment in an emergency			
Please provide details of any prescribed medication that you may be taking regularly.			
Emergency Contact names and phone numbers.			

If you or your crew are under 18, please complete the following section:

	HELM	CREW 1	CREW 2
Years' experience of sailing			
Name and mobile phone number of parent or guardian attending the event			

#### **Risk Statement**

It must be recognised that sailing is by its nature an unpredictable sport and you agree and acknowledge that:

1. You are aware of the inherent element of risk involved in the sport and you accept responsibility exposing yourself to such inherent risk while taking part in the event.
2. You will comply at all times with the instructions of the event coordinator / Race officer particularly with regard to handling of boats, wearing of buoyancy aids and suitable clothing for the conditions
3. You accept responsibility for any injury, damage, or loss to the extent caused by your own negligence.
4. You will not participate in the event whilst your ability to skipper or crew a vessel is impaired by alcohol, drugs or whilst unfit to participate.
5. The provision of patrol boat cover is limited to such assistance as can be practically provided in the circumstances.
6. You are aware of any specific risks drawn to your attention by the event coordinator/ Race officer

#### **Cancellation**

You understand that the event coordinator/ Race officer may cancel or postpone the event at any stage in the event of bad weather, equipment failure or any other reason affecting the safe running of the event.

#### **Misconduct**

You understand that the event coordinator/ race officer or any club official may exclude anyone from the event and evict anyone from the premises who refuses to comply with these entry terms or club rules or who misconducts themselves in any way or who causes damage or annoyance to other persons.

#### **Data Protection**

The information given by you on this form will be used by us to process your entry and for attending to you whilst at the event. We shall also include your name and address on our mailing list. If you do not want to receive our newsletters and details of our promotions please tick here

#### **Photography**

We may take photographs and video footage of events for use by us in connection with promotion of our activities, if you object to the use of these images please tick here\_

#### **Parental/ Guardian consent if under 18**

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 the particulars given above are correct and complete in all respects.

Signed :

Parent / Guardian Name:

Date: